

FI9000000589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

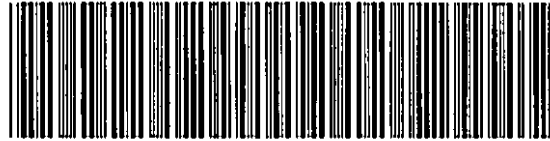
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COVER LETTER

TO: Registration Section
Division of Corporations
Good Vibrations Shoes Inc.

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
Dr. Richard D. Koenig

_____	Name of Person
Good Vibrations Shoes Inc.	
_____	Firm/Company
3551 Chesapeake Circle	
_____	Address
Boynton Beach, FL 33436	
_____	City/State and Zip code
richard@thevibratingshoe.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Koenig	321	877-3442
_____	at (_____)	_____
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|--|--|---|---|

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

Good Vibrations Shoes Inc

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. _____ 3. _____
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Wyoming 47 466 7597
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
01 January 2019
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3551 Chesapeake Circle, Boynton Beach, FL 33436
(Principal office address)
- _____ (Current mailing address, if different)

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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Richard D. Koenig

Name: _____

3551 Chesapeake Circle

Office Address: _____

Boynton Beach

33436

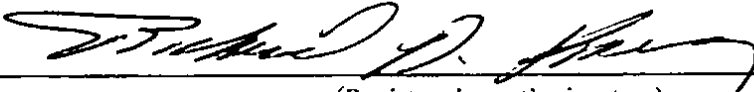
_____, Florida _____

(City)

(Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Dr. Richard D. Koenig

Chairman: _____
3551 Chesapeake Circe, Boynton Beach, FL 33436
Address: _____

Charlotte B. Koenig

Vice Chairman: _____
3551 Chesapeake Circe, Boynton Beach, FL 33436
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

Dr. Richard D. Koenig

President: _____
3551 Chesapeake Circe, Boynton Beach, FL 33436
Address: _____

Charlotte B. Koenig

Vice President: _____
3551 Chesapeake Circe, Boynton Beach, FL 33436
Address: _____

Charlotte B. Koenig

Secretary: _____
3551 Chesapeake Circe, Boynton Beach, FL 33436
Address: _____

Richard D. Koenig

Treasurer: _____
3551 Chesapeake Circe, Boynton Beach, FL 33436
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Richard D. Koenig

13. _____
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that

GOOD VIBRATIONS SHOES INC

a profit corporation originally incorporated under the laws of **Delaware**, on **July 30, 2015**, did on **October 25, 2016**, apply for a Certificate of Incorporation and filed Articles of Domestication in the office of the Secretary of State of Wyoming.

I FURTHER CERTIFY that this profit corporation has renounced its state or country of incorporation, and is now incorporated under the laws of the state of Wyoming and is in good standing as of the date of this certificate.

I have affixed hereto the Great Seal of the State of Wyoming and duly executed this official certificate at Cheyenne, Wyoming on this Thursday, January 24, 2019.



Filed Date: 10/25/2016

Edward A. Buchanan
Secretary of State

By: Bailey Johnson