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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

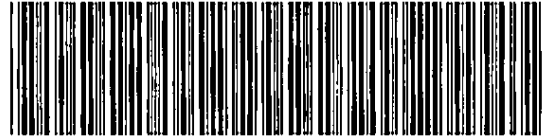
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900324180079

CLERK OF COURT
TALLAHASSEE, FL

2019 FEB 14 AM 11:24

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02/14/19--01005--003 **67.50

FEB 23 2019
S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations
Zona Health, 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:
Mark Young

Name of Person
Zona Health, Inc.

Firm/Company
840 SW 81st Avenue, Fourth Floor

Address
North Lauderdale, Florida 33068

City/State and Zip code
mark@zona.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Young 313 510-0098

Name of Person at (_____) 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 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 checked="" 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.*

Zona Health, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Idaho 20-1068075

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
03/2004

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
01/01/2019

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
840 SW 81st Avenue, Fourth Floor, North Lauderdale, Florida 33068

7. _____
(Principal office address)
(same as above)

(Current mailing address, if different)

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

Name:

840 SW 81st Avenue, Fourth Floor

Office Address:

North Lauderdale

33068

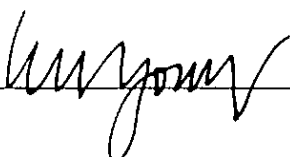
_____, Florida

(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.

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2019 FEB 14 AM 11:24
DEPT. OF STATE
TALLAHASSEE, FL

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

A. DIRECTORS

Stinson Slawson

Chairman: _____
3077 Carter Hill Road

Address: _____
Montgomery, Alabama 36111

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

Mark Young

President: _____
350 SE 2nd Street, Unit 1770

Address: _____
Fort Lauderdale, Florida 33301

Vice President: _____

Address: _____

John Griffiths

Secretary: _____
3236 S Kingsbury Way, Eagle, Idaho 83616

Address: _____

Treasurer: _____

Address: _____

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

12. Mark Young _____
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.

13. Mark Young, CEO _____
(Typed or printed name and capacity of person signing application)

FILED
2019 FEB 14 AM 11:25
CLERK OF THE
DEPARTMENT OF
STATE
TALLAHASSEE, FL



STATE OF IDAHO

Lawrence Denney | Secretary of State
Business Office
450 North 4th Street
PO Box 83720
Boise, ID 83702

Mark Young
TAKE2 TELECOM
PENTHOUSE 1
840 SW 81ST AVE
N LAUDERDALE, FL 33068

February 11, 2019

Request Type: Certificate of Existence/Filing

Request #: 0003426768
Receipt #: 000154831

Issuance Date: 02/11/2019
Copies Requested: 0

Regarding: ZONA HEALTH, INC.

Filing Type: General Business Corporation (D)

File #: 467549

Formation/Qualification Date: 03/24/2004

Status: Active-Good Standing

Formation Locale: IDAHO

Duration Term: Perpetual

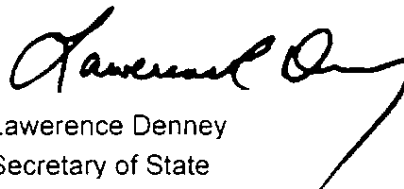
Inactive Date:

Certificate of Existence

I, Lawrence Denney, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

ZONA HEALTH, INC.

is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above.


Lawrence Denney
Secretary of State

Processed By: Business Division

Verification #: 001011408



0003396314

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***CHANGE OF BUSINESS MAILING ADDRESS**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$0.00

*For Office Use Only***-FILED-**

File #: 0003396314

Date Filed: 1/14/2019 1:07:10 PM

The entity name and address for which the mailing address is being changed:

The name of the business entity is: ZONA HEALTH, INC.

The file number of this entity on the records of the Idaho Secretary of State is: 0000467549

New Address

Mark Young
840 N LAUDERDALE AVE
FL 4
NORTH LAUDERDALE, FL 33068-2001

Signature:


Mark Young01/14/2019

Sign Here

Date

Signer's Capacity CEO

B0146-0791 01/14/2019 1:07 PM Received by ID Secretary of State Lawrence Denney

No. C 153800		Reinstatement Annual Report Form ADMIN DISSOLVED 06/29/2018		2. Registered Agent and Office (NOT A P.O. BOX) DAVE WOOD 3236 S KINGSBURY WAY EAGLE ID 83616	
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00		1. Mailing Address: Correct in this box if needed. ZONA HEALTH, INC. MARK YOUNG DONALD KING 350 SE 2ND ST 3077 CARTER Hill Rd. 1770 MONTGOMERY, AL. 36111 FT. LAUDERDALE FL 33301 USA		3. New Registered Agent Signature.	
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres.					
Office Held	Name	Street or PO Address	City	State	Country Postal Code
DIRECTOR	DAVE WOOD	12554 W. BRIDGER ST. #108	BOISE	ID	83713
DIRECTOR	STINSON SLAWSON	12554 W. BRIDGER ST. #108	BOISE	ID	83713
DIRECTOR	DALE WEST	12554 W. BRIDGER ST. #108	BOISE	ID	83713
DIRECTOR	STEVE OUGH	12554 W. BRIDGER ST. #108	BOISE	ID	83713
SECRETARY	JOHN GRIFFITHS	12554 W. BRIDGER ST. #108	BOISE	ID	83713
5. Organized Under the Laws of:		6.			
IDAHO C 153800		Signature: 		Date: 8-8-18	
		Name (type or print): STINSON SLAWSON		Title: Chairman	
Issued 08/08/2018 by online					