# F1900000957

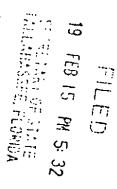
(Requ	estor's Name)	·
(Addre	ess)	
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(City/S	State/Zip/Phon	ne #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Na	me)
(Docu	ment Number	)
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ing Officer:	
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O SIMMONS FEB 2 6 2019

### **COVER LETTER**

TO:	Registration Secti Division of Corpo				
CHDI	10 Holidays	, Inc.			
Subi	TECT:	Name of corpora	ation - mu	st include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence,'	n by Foreign Corporation or "Certificate of Good corporation to transact bu	Standing*	and check are sub	ct Business in Florida," mitted to register the
Please	return all correspoi	ndence concerning this m	atter to th	e following:	
Scott :	Schultz				
		Nam	e of Perso	า	
10 Ho	lidays, Inc.				
	<u>-</u>	FirmV	Company		
1513	Via De Luna Drive				
		Д	ddress		
Pensa	cola Beach, FL 32561				
		•	ate and Zi	code	
Si	OTT@ Santas	, com			
		E-mail address: (to be u	sed for fu	ure annual report i	notification)
For fu	orther information co	ncerning this matter, ple	ase call:		
Scott	Schultz	425 at (	3-	6-8159	
	Name of Person	Area	Code	Daytime Telep	hone Number
	STREET/COUR Registration Section Division of Corporal Clifton Building 2661 Executive Corporal Tallahassee, FL. 1	on orations enter Circle 32301		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
		s following amount:  \$78.75 Filing Fee & Certificate of Status		.75 Filing Fee & tified Copy	☐ \$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.

		Comparing havings in Florida
	ble in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida) 20 8351378
Washington		_ 3
(State or country January 25, 2007)	under the law of which it is incorporated	
•	of incorporation)	5(Date of duration, if other than perpetual)
,		•
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60 a Drive, Pensacola Beach, FL 32561	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)
1313 VIA ISC Edite		rincipal office address)
	(Current n t address of Florida registered agent:	nailing address, if different)  (P.O. Box NOT acceptable)
Name and stree	- 5 t	
Name and stree Name:	Scott Schultz	<del></del>
Name:	1513 Via De Luna Drive	<del></del>
Name:	1513 Via De Luna Drive	32561 , Florida
		<del></del>

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 Scott Shultz Chairman: 1513 Via De Luna Drive Address: Pensacola Beach, FL 32561 Vice Chairman: Address: Director: \_\_ Address: \_ **B. OFFICERS** Scott Schultz President: 1513 Via De Luna Drive Address: \_ Pensacola Beach, FL 32561 Vice President: Scott Schultz 1513 Via De Luna Drive, Pensacola Beach, FL 32561 Address: \_ Scott Schultz Treasurer: \_ 1513 Via De Luna Drive, Pensacola Beach, FL 32561 NOTE: If necessary, you may attach an adderdum to the application listing additional officers and/or directors. 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. Scott Schultz, President (Typed or printed name and capacity of person signing application)



## Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

#### CERTIFICATE OF EXISTENCE

OF

#### 10 HOLIDAYS, INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 01/25/2007.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 02/05/2019

UB! Number: 602 688 996



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

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Date Issued: 02/05/2019