

(Requestor's Name)	<u> </u>		
(Address)			
(Address)	.		
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LURE CREATIVE DESIGN,	INC.
50303011	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact busing	anding" and check are submitted to register the
Please return all correspondence concerning this matt	ter to the following:
MICHAEL HOW	ULEN
Name o	of Person
LURE CREATINE	DESIGN INK.
Firm/Co	ompany
2350 VALLEY VI	ιεω DR.
	dress $\frac{1}{\sqrt{2}}$
CUYAHOLA FALLS, O	и 44223 — — — — — — — — — — — — — — — — — —
	and Zip code
mike alure creat	ive design, com
E-mail address: (to be used	d for future annual report notification)
For further information concerning this matter, please	: call:
MICHEL HOWDEN at (330) 907-8710
Name of Person Area Co	ode 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:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, 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.

(Enter name of co	rporation; must include "INCORPORATEI rp." "Inc," "Co." or "Corp."))," "COMPANY	," "CORPORATION,"		
(If name unavailal	ble in Florida, enter alternate corporate nan	ne adopted for the	: purpose of transacting bus	iness in Florida)	
2. OH10		3 81-	5100759		
	under the law of which it is incorporated)	<u></u> -	(FEI number, if applicat	ole)	
4. 12-17-	16	5			
	of incorporation)	(Dat	te of duration, if other than	perpetual)	
6.	NIA				
	(Date first transacted business (SEE SECTIONS 607.1501 & 607	•	-		
7. 2350	VALLEY VIEW PR.	CUYANOCA	FALLS CH 44	223	
	VALLEY VIEW PR. (Prin	cipal office addre	ess)		•
	1 *				_
	(Current ma	iling address, if d	ifferent)		•
8. Name and street	t address of Florida registered agent: (P.O. Box NOT	_acceptable)	2019 HAR	و ح
Name:	Registered Agents Inc.			年 第 - 35 - 35 - 35 - 35 - 35 - 35 - 35 - 3	IJ∀t: £.
Office Address:	7901 41 SIN SI	e 300		25. E. 3. 25. E. 3. E. 3	;
	St. Petersburg (City)	Florid	a 3370 2		•
	(City)		(Zip code)	5 2	
Q Registered age	nt ³ c neceptanes			· · · · · · · · · · · · · · · · · · ·	

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.

II. Names	and business addresses of officers and/or directors:		
A. DIREC			
		<u> </u>	
Address: _			
Vice Chair	nan:		
Address:			
Director:			
Address: _			
Director: _			
Address: _			
_			
B. OFFIC	CERS	-	
President:	MICHAEL HOWAZN	····	
	2350 VALLEY VIEW PR.		
	CUYANOGA FALLS, OH 44223	2019	
Vice Presio	ent:	. 20	<u> </u>
Address: _			.
_			. •
Secretary:	<u>.</u>	: 29	
			
Treasurer:			
Address: _		_	
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or dis	rectors.	ı
سہ 12.	Signature of Director or Officer		
 -	Signature of Director or Officer		
are true a	er or director signing this document (and who is listed in number 11 above) affirms that the fact and that he or she is aware that false information submitted in a document to the Department of Space felony as provided for in s.817.155, F.S.	tate co	nstitutes
13	MICHAEL HOWREN		
	(Typed or printed name and capacity of person signing application)		

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show LURE CREATIVE DESIGN, INC., an Ohio corporation, Charter No. 3973493, having its principal location in Cuyahoga Falls, County of Summit, was incorporated on December 29, 2016 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 19th day of February, A.D. 2019.

Ohio Secretary of State

For Jone

Validation Number: 201905001766