

F190 0000 1855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

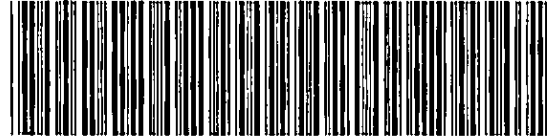
(Document Number)

Certified Copies _____ Certificates of Status _____

2 WORKING Doc #
Special Instructions to Filing Officer:

W19-16715

Office Use Only



200323898252

000042 1-10 11-10 11-10 11-10

FILED
2019 APR 12 PM 2:17
CLERK OF COURT
ALABAMA
MONTGOMERY

U.S.
4-16-19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2019

MARIE GRIFFIN
60401 HANES ROAD
BEND, OR 97702 US

SUBJECT: IMPROVISATIONS, INC.
Ref. Number: W19000016715

We have received your document for IMPROVISATIONS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

- ✓ A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 919A00003671

2019 FEB 21 10:11:18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Improvisations, Inc.

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:

Marie Griffin

Name of Person

Improvisations, Inc.

Firm/Company

60401 Hanes Road

Address

Bend Oregon 97702

City/State and Zip code

accounting@improvizations.com

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

For further information concerning this matter, please call:

Marie Griffin

Name of Person

at (503) 260-7401

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:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified 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.*

1. Improvisations, Inc.
(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)
2. Arizona 3. 86-10402524
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/22/2005 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 03/19/2018
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 60401 Hanes Road, Bend, Or 97702
(Principal office address)
- _____
(Current mailing address, if different)

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

Name: Registered Agents Inc.

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702
(City) (Zip code)

FILED
2015 APR 12 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 Agents Inc.

Bill Havre

- Assistant Secretary

(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

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Rebecca A deSilva

Address: 60401 Hanes Road, Bend, Or 97702

Director: Bryan L deSilva

Address: 60401 Hanes Road, Bend, Or 97702

B. OFFICERS

President: Rebecca A deSilva

Address: 60401 Hanes Road, Bend OR 97702

Vice President: _____

Address: _____

Secretary: Bryan L deSilva

Address: 60401 Hanes Road, Bend OR 97702

Treasurer: _____

Address: _____

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

2. Rebecca Ann deSilva

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.

3. Rebecca Ann deSilva

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

FILED
2012 APR 12 PM 2:11
TALAMAS ST. 100002

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

IMPROVISATIONS, INC.

ACC file number: 12513160

was incorporated under the laws of the State of Arizona on 12/22/2005;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.

IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 03/26/2019



A handwritten signature in cursive script, reading "Matthew Neubert".

Matthew Neubert, Executive Director