

COVER LETTER

TO: Registration Section
Division of Corporations
Inspired Touch Signs and Graphics 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:
Deanna E. Smith

_____	Name of Person
Inspired Touch Signs and Graphics Inc	
_____	Firm/Company
11406 Lake Katherine Circle	
_____	Address
Clermont, Florida 34711	
_____	City/State and Zip code
smithde74@yahoo.com	

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

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2019 MAY 20 PM 4:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

Deanna E. Smith	808	387-8409
_____	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:

- \$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.

Inspired Touch Signs and Graphics Inc

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

Inspired Signs and Graphics Inc.

2. _____ 3. _____
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable)
Virginia 46-5696325

4. _____ 5. _____
(State or country under the law of which it is incorporated) (Date of duration, if other than perpetual)
19 May 2014

6. _____
(Date first transacted business in Florida, if prior to registration)

7. _____
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
20 Rawlings Place Suite 123 Fredericksburg VA 22405

8. _____
(Principal office address)
11406 Lake Katherine Circle, Clermont Florida 34711

_____ (Current mailing address, if different)

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

Deanna E. Smith

Name:

11406 Lake Katherine Circle

Office Address:

Clermont

34711

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

A. DIRECTORS

Deanna E. Smith ✓

Chairman: _____
11406 Lake Katherine Circle

Address: _____
Clermont Florida 34711

Gary A. Smith ✓

Vice Chairman: _____
11406 Lake Katherine Circle

Address: _____
Clermont Florida 34711

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

Deanna Elaine Smith ✓

President: _____
11406 Lake Katherine Circle

Address: _____
Clermont, Florida 34711

Gary Anthony Smith ✓

Vice President: _____
11406 Lake Katherine Circle

Address: _____
Clermont, Florida 34711

Secretary: _____

Address: _____

Treasurer: _____

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.

13. _____
Deanna Elaine Smith President

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

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That Inspired Touch Signs & Graphics Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the date of its incorporation is May 19, 2014;

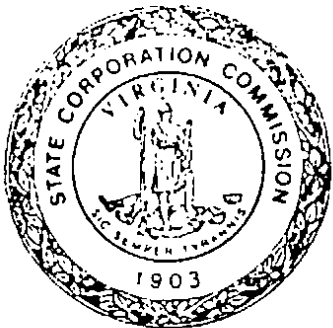
That the period of its duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia the date set forth below.

Nothing more is hereby certified.

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TALLAHASSEE, FLORIDA

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*Signed and Sealed at Richmond on this Date:
May 13, 2019*

Joel H. Peck

Joel H. Peck, Clerk of the Commission