

F1900000576

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

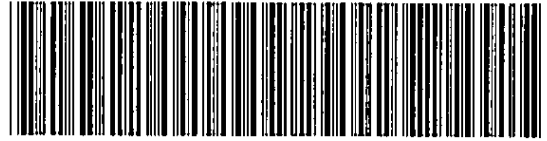
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W19000057667

Office Use Only



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2019 JUN 28 PM 4:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Y SCOTT

JUL 08 2019





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 18, 2019

DAVIA BRADSHAW  
629 SW 1ST AVE.  
FT. LAUDERDALE, FL 33301

SUBJECT: ASHTON'S PALACE OF POSSIBILITIES INC.  
Ref. Number: W19000057667

We have received your document for ASHTON'S PALACE OF POSSIBILITIES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return 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.

Yvette Scott  
Document Specialist II

Letter Number: 919A00012248

RECEIVED

JUN 28 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ashton's Palace of Possibilities 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:

Davia Bradshaw

Name of Person

Ashton's Palace of Possibilities Inc.

Firm/Company

629 SW 1st Ave

Address

Ft Lauderdale FL 33301

City/State and Zip code

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

For further information concerning this matter, please call:

Davia Bradshaw

Name of Person

at ( 305 ) 785-6799

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Ashton's Palace of Possibilities 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. Georgia 3. 81-1097390  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Jan 12, 2016 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 629 SW 1st Ave Ft Lauderdale, FL 33301  
(Principal office address)

(Current mailing address, if different)

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


Name: Davia Bradshaw

Office Address: 629 SW 1st Ave

Ft Lauderdale, Florida 33301  
(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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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman:

~~Davia Bradshaw~~

Address:

Vice Chairman:

~~Rodney Holmes Jr~~

Address:

Director:

Davia Bradshaw

Address:

629 SW 1st Ave  
Ft Lauderdale, FL 33301

Director:

Address:

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TALLAHASSEE, FLORIDA

**B. OFFICERS**

President:

Rodney Holmes Jr

Address:

629 SW 1st Ave  
Ft Lauderdale, FL 33301

Vice President:

Address:

Secretary:

Breanna Pope

Address:

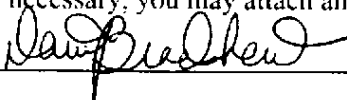
9238 North 52 street Tampa, FL 33617

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.

Davia Bradshaw CEO/Director

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

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

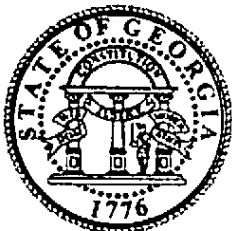
**Ashton's Palace of Possibilities, Inc.**  
a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 17409766  
Date Inc/Auth/Filed: 01/12/2016  
Jurisdiction : Georgia  
Print Date : 06/22/2019  
Form Number : 211



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State