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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	? #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne) .
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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July 8, 2019

ALEX DONALDSON 2807 MIDDLETON CIRCLE KISSIMMEE, FL 34743

SUBJECT: ART IN A SMILE INC Ref. Number: W19000062345

We have received your document for ART IN A SMILE INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$70.00.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Letter Number: 719A00013653

Deborah Bruce Corporate Records Supervisor II

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporations				
CHD	ART IN A SMILE INC				
20D4		f corporation	- must include suffix		 .
Dear S	Sir or Madam:				
"Certi	nclosed "Application by Foreign Conficate of Existence," or "Certificate referenced foreign corporation to tra	of Good Stan	ding" and check are sub-	et Business in Flor mitted to register t	ida." he
	return all correspondence concernir DONALDSON	ng this matter	to the following:		
		Name of F	Person		
ARTI	N A SMILE				
2807 N	AIDDLETON CIRCLE	Firm/Comp	oany		
KISSE	MMEE F1. 34743	Addres	55		19 JUL 19
bluebo	y1482@gmail.com	City/State an	d Zip code	.	
	E-mail address:	(to be used fo	or future annual report no	otification)	- p
For fur	ther information concerning this ma	tter, please ca	all:		: <u>5</u>
ALEX	DONALDSON	718 t (926-3304		
	Name of Person	Area Code	Daytime Teleph	one Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee. FL	ction porations	
	ed is a check for the following amou 00 Filing Fee	Fee &	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Certificate of Certified Copy	Status &

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 "Inc.," "Co.," "C	corporation; must include "INCORPORATED," "Corp." "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION	
(If name unavai	able in Florida, enter altemate corporate name add	opted for the purpose of transacting	business in Florida)
NEW YORK	83	5-0848288	,
	ry under the law of which it is incorporated)	(FEI number, if app	licable)
	of incorporation)	(Date of duration, if other t	han perpetual)
	(SEE SECTIONS 607.1501 & 607.1502 VE. ROSEDALE NY 11422 (Principal of Concincing Concin	. F.S., to determine penalty liability office address)	· ·
	(Current mailing a	ddress. if different)	
. Name and stree	et address of Florida registered agent: (P.O. I ALEX DONALDSON	30x <u>NOT</u> acceptable)	2019 JUL 19 PM 4: 51
Office Address:	2807 MIDDLETON CIRCLE		,
		_	
	KISSIMMEE	34743 , 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 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:

Chairman		<u>-</u>		
Address:	2807 MIDDLETON CIRCLE			
	KISSIMMEE FL 34743			
Vice Chai	man;			
Address:				
Director:				
Address:				
Director:				
Address:				
B. OFFI	ALEX DONALDSON		<u> </u>	_ -
	2807 MIDDLETON CIRCLE	<u>.</u>	2019	
	KISSIMMEE FL 34743			<u> </u>
Vice Presi	dent:	- 	9	-, 17
Address:		<u> </u>	2. 2.	(3.00) (3.00)
Secretary:		1 -	_ 	
Treasurer:				
Address: _				
NOTE: 1	f necessary, you may attach an addendum to the application listing additional officers a			
The office	Signature of Director or Officer r or director signing this document (and who is listed in number 11 above) affirms that d that he or she is aware that false information submitted in a document to the Departm	the facts s	stated he	erein

State of New York **} ss: Department of State**

I hereby certify, that the Certificate of Incorporation of ART IN A SMILE INC was filed on 06/08/2018, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 04th day of June two thousand and nineteen.

Whitney Clark