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(R	equestor's Name)	
. (A	ddress)	
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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September 6, 2019

GRETCHEN ZARAK 6271 ST AUGUSTINE RD STE 24-1153 JACKSONVILLE, FL 32217

SUBJECT: TERMINAL 661 CORPORATION

Ref. Number: W19000081252

We have received your document for TERMINAL 661 CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Brooke N Kinsey Regulatory Specialist II

www.sunbiz.org

Letter Number: 119A00018361

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Termina 66/
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:
Gretchen ZovaK Name of Person Terminal 661 Firm/Company
Name of Person
Terminal 661
Firm/Company
(6271 St Hygustine Rd, Ste 24-1/53, Jacksonville, +2322
Address Address
City/State and Zip code
6271 St Agustine Rd, Ste 24-1/53, Jacksonville, FL 322 Address Jacksonville, FL 32217 City/State and Zip code help.chocdateoubognai/.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gretchen ZoVak at (661) 210-6554 Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother 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 & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy 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.

If name unavailable in Florida, er	ter alternate corporate name adopt	ted for the purpose of transacting	ng business in Florid	(a)
(State or country under the law o	3. {	34-295638 (FEI number, if a	pplicable)	
` ' '	5	•	•	
· Date of Incorporation)	(Date of duration, if other	r than perpetual)	
(D)	ate first transacted business in Flo	rida, if prior to registration)	lina	
(SEE SE	ECTIONS 607.1501 & 607.1502,	F.S., to determine penalty liabi	ility) 3 Jac <i>Kso</i>	nville, FL
(SEE SE	ECTIONS 607.1501 & 607.1502,	F.S., to determine penalty liabi	dity) B Jackso	nville, FL
(SEE SE	ECTIONS 607.1501 & 607.1502,	F.S., to determine penalty liabi	3 Jac <i>ks</i> o 91387	nville, FL
6271 St 4799Calla Li	Augustine R (Principal of (Current mailing ac	F.S., to determine penalty liabiled, Ste 24-1153 ffice address) Clauta, CA idress, if different)	3 Jac <i>ks</i> o 91387	nville, FL
(SEE SI 6271 St 4749 Calla Li	Augustine R (Principal of (Current mailing actions)	F.S., to determine penalty liabile of the second se	3 Jackso 91387	119 SEP
(SEE SI 6271 St 4799 Calla Li	Augustine R (Principal of (Current mailing ac	F.S., to determine penalty liabile of the second se	3 Jackso 91387	119 SEP

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.

A. DIRECTORS				
Chairman:				
Address:				
Vice Chairman:				
Address:		_ 		
		<u>.</u>		 _
Director:				
Address:		<u>-</u>		
Director:				
Address:				·
		•		
B. OFFICERS				
President: <u>Gretchen</u> Zovak				
Address: 14749 Calla Lily Ct, Sa	nta Clara	<u>C.</u>	9 9	<u> 138</u> 7
Vice President:				
Vice President:			2019	
Vice President:			2019 SEP	77
Address:		1.0	2019	
Address:			2019 SEP -	777
Address: Secretary: Address:			2019 SEP -6	777
Address: Secretary: Address: Treasurer:			2019 SEP -6	777
Address: Secretary: Address: Treasurer: Address:		r-	2019 SEP -6 PH 1: 13	777
Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application lis	ting additional officers		2019 SEP - 6 PH 1: 13	
Address: Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application lis 12. Signature of Director or Office	ting additional officers		2019 SEP - 6 PH 1: 13	
Secretary: Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application lis 12. Signature of Director or Offic The officer or director signing this document (and who it listed in numberare true and that he or she is aware that false information submitted in a	ting additional officers a	t the fact	2019 SEP - 6 PH 1: 13	rerein
Address: Address: Treasurer: Address: NOTE: It necessary, you may attach an addendum to the application list. Signature of Director or Officer or director signing this document (and who it listed in number 1).	ting additional officers a	t the fact	2019 SEP - 6 PH 1: 13	rerein

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Terminal661

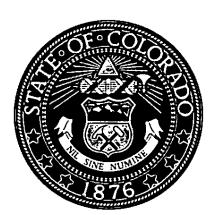
is a

Corporation

formed or registered on 05/14/2014 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20141303835.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 09/04/2019 that have been posted, and by documents delivered to this office electronically through 09/06/2019 @ 10:16:22.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 09/06/2019 @ 10:16:22 in accordance with applicable law. This certificate is assigned Confirmation Number 11785473



Secretary of State of the State of Colorado

******************End of Certificate**

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."