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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Dockside Properties, Inc.				
*	e of corporation	- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign "Certificate of Existence," or "Certificate above referenced foreign corporation to	ate of Good Star	nding" and check are sub		
Please return all correspondence conce	rning this matter	r to the following:		
Scot J. O'Bryan				
	Name of	Person		
Dockside Properties, Inc.				
	Firm/Con	pany		
3023 Kaye Lawn Drive				
	Addr	288		_
Louisville, KY 40220				
	City/State a	nd Zip code		
				2011
E-mail addro	ess: (to be used	for future annual report i	notification)	20 D RC
For further information concerning this	matter, please of	call:	-	љ :-
Walter J. Snell, Esq.	at (386) 255-5334		
Name of Person	Area Cod	e Daytime Telep	hone Number -	3: 55
STREET/COURIER ADDRI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ESS:	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7	
Enclosed is a check for the following a	mount:			
■ \$70.00 Filing Fee □ \$78.75 Fil Certificate	ing Fee & □ e of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filin Certificate Certified C	of 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.

(If name unavaila	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacting busi	ness in Florida)
Kentucky	3	81-2634524	
May 16, 2018	y under the law of which it is incorporated) 5.		
Sentember 20, 2	of incorporation) 019		perpetual)
	(Date first transacted business in E (SEE SECTIONS 607.1501 & 607.150 Drive, Louisville, KY 40220	Florida, if prior to registration) 2. F.S., to determine penalty liability)	
		 I office address)	
Name:	t address of Florida registered agent: (P.O. Robert L. Mattingly 141 Woodhaven Circle East	Box <u>NOT</u> acceptable)	2019 (412)
Name:	Robert L. Mattingly 141 Woodhaven Circle East Ormond Beach	Box NOT acceptable)	S
	Robert L. Mattingly 141 Woodhaven Circle East Ormond Beach	32174	1

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: Address: ____ Address: ____ **B. OFFICERS** President: Scot J. O'Bryan Address: 3023 Kave Lawn Drive Louisville, KY 40220 Vice President: Robert L. Mattingly ب Address: 141 Woodhaven Circle East Ormond Beach, FL 32174 Secretary: Treasurer: Address: _____ NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. 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. Roberty L. Mattingly, Vice President

Commonwealth of Kentucky Alison Lundergan Grimes, Secretary of State

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 222212

Visit https://app.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Alison Lundergan Grimes, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

DOCKSIDE PROPERTIES Inc.

is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is May 18, 2016 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 1st day of November, 2019, in the 228th year of the Commonwealth.

5 PH 3: 55



Alison Lundergan Grimes

Secretary of State

Commonwealth of Kentucky

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