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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		·		
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FOREIGN PROFIT/NONPROFIT CORPORATION GuyKat, Inc.

Certificate of Status	0
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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. GuyKat, Inc.	<u></u>		
	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavai	lable in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida)	
2. Delaware	3.		
(State or count	try under the law of which it is incorporated) 3.	(FEI number, if applicable)	
4, 9/24/2019	5	5	
(Dat	e of incorporation)	(Date of duration, if other than perpetual)	
6.			
	(Date first transacted business in		
		02, F.S., to determine penalty liability)	
7. 3001 North Roc	ky Point Drive East, Suite 200 Tampa FL 33607		
	(Principal	al office address)	
7901 4th St N S	STE 300 St. Petersburg FL 33702		
	(Current mailin	g address, if different)	
8. Name and stre	eet address of Florida registered agent: (P.C). Box NOT acceptable)	
Name:	Northwest Registered Agent LLC		
Office Address:	7901 4th St N STE 300	<u></u>	
	St. Petersburg	, Florida <u>33702</u>	
	(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.



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. DIRI	CCTORS	
Chairman		
Address:		
Vice Chai	rman:	
Address:		
_		
Director:	Guy McEvoy	
Address:	7901 4th St N STE 300	
	St. Petersburg FL 33702	
Director:		
Address:		
B. OFF	ICERS	
President	Guy McEvoy	
Address:	7901 4th St N STE 300	
	St. Petersburg FL 33702	<u>.</u>
Vice Pres	ident:	<u>,</u>
Address:	<u> </u>	
Secretary	Thomas Thorelli	
Address:	7901 4th St N STE 300 St. Petersburg FL 33702	
Treasurer	Guy McEvoy	
Address:	7901 4th St N STE 300 St. Petersburg FL 33702	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
12		
are true a third d	Signature of Director or Officer ter or director signing this document (and who is listed in number 11 above) affirms that the facts stated here and that he or she is aware that false information submitted in a document to the Department of State constitutegree felony as provided for in s.817.155, F.S.	in Ites

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GUYKAT, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SIXTEENTH DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GUYKAT, INC."

WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

2019 N 17 FYIZ: 37

at core delaware spy/aut

Authentication: 204227449

Date: 12-16-19

7623451 8300 SR# 20198665230