# F20000000499

(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:
W19000101237
W19000101237





500336319415

11/84/19--01038--003 \*+67.50

2020 JAH 22 PN 1:12

50/21/2

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: LIZA Ellers Inc.
Selber:
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:
Elizabeth A. Eilers
Name of Person
Liza Eilers INC.
Firm/Company
371 3rd ST.
Address
ATLANTIC BEACH, FL. 32233 City/State and Zip code lizacilers. Com
City/State and Zip code
liza@lizaeilers.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Elizabeth Eilers ar (720) 490 6234
Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327
Clifton Building P.O. Box 6327  2661 Executive Center Circle Tallahassee, FL 32314  Tallahassee, FL 32301
Tallahassee, FL 32301
Enclosed is a check for the following amount:
S70.00 Filing Fee S78.75 Filing Fee & Certified Copy S78.75 Filing Fee & Certified Copy Certified Certified Copy Certified Certified Copy Certified Certified Copy Certified Cer

## 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 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) (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) , rd (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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. DIRECTORS Chairman: Director: Address: Director: **B. OFFICERS** President: Address: \_ Vice President: \_ Address: Secretary: \_ Address: Treasurer: Address: NOTE: If necessary, you may attach an adderdum 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<sub>3</sub>817.155, F.S. Typed or printed name and capacity of person signing application) 1-117 Abeth

# 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,

LIZA EILERS, INC.

#### is a

#### Corporation

formed or registered on 12/30/2003 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 20031408834.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/23/2019 that have been posted, and by documents delivered to this office electronically through 10/25/2019 @ 08:09:30.

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 10/25/2019 @ 08:09:30 in accordance with applicable law. This certificate is assigned Confirmation Number 11875994



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/hiz/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."



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2019

ELIZABETH A. EILERS 371 3RD ST ATLANTIC BEACH, FL 32233

SUBJECT: LIZA EILERS INC Ref. Number: W19000101237

We have received your document for LIZA EILERS 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 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.

Sharon D Franklin Regulatory Specialist II RECEIVED Letter Number: 519A00023677

Ms. Franklin

Share provided Sirelature. (Stirred, Law only require)

The pame person (which can be the Shareholder Broner)

The pame person (which can be the Shareholder Broner)

Are both multiple office prouting at me time

Ale section of sale 1 is more due too but there

allowed to have 1 is more due too but there

are not limitations as to who the directions (its me.)

are not limitations as to who he pourse (me)

She officers are apparated by pluce process. In their

www.sunbiz.org 10 x to line purpose the line purps tured

www.sunbiz.org 10 x to line purps tured

Division of Corporations. BO BOX 6327 Tollaborate Politica 32321