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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: FXE, INC. Name of corporation - mus		
Name of corporation - mus	t include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Autho "Certificate of Existence," or "Certificate of Good Standing" above referenced foreign corporation to transact business in F	and check are submitted to registe	lorida," er the
Please return all correspondence concerning this matter to the	following:	
Francis X. Fornis		
Francis X. Ennis, Jr. Name of Person	1	
FXE, Inc. Firm/Company		76 3
Firm/Company		(_
21405 Olean Boulevard, Unit 1 Address	127	
Address		(?)
Port Charlotte F1 33952		
Port Charlotte, FL 33952 City/State and Zip		8:43
flex D11 @hotmail.com E-mail address: (to be used for fut		
E-mail address: (to be used for fun	ure annual report nothication)	
For further information concerning this matter, please call:		
Francis X. Ennis, Jr., at (941) 1 Name of Person Area Code	0101 - 3402 Daytime Telephone Number	_
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	P.O. Box 6327 Tallahassee, FL 32314	
Tallahassee, FL 32303	paradoce, i E 5201.	
<u> </u>	.75 Filing Fee & 📉 \$87.50 Fi	te 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.

1. FXE, Inc.	ust include "INCORPORATED			
(Enter name of corporation; m "Inc.," "Co.," "Corp," "Inc.," "Co.," "Corp," "Inc.," "Co.," "Corp," "Inc.," "Corp," "Corp," "Inc.," "Corp," "Co		," "COMPANY," "C	ORPORATION."	
·				
Frank's P	a, enter alternate corporate name	adopted for the purpo	se of transacting busines	s in Florida)
2 Georgia, U.S. (State or country under the la	w of which it is incorporated)	58-243	2 4 D8 Fnumber, if applicable)	
4. December 28, 19 (Date of incorporate	9 g 5.	Perpetual (Date of du	ration, if other than perpe	etual)
6. <u>January 15</u> (SE)	(Date first transacted business i E SECTIONS 607.1501 & 607.1	in Florida, if prior to re 502, F.S., to determine	egistration) e penalty liability)	·
7. 67 Doris Road	•			
21405 Olean F	Soule voud, Uni (Current maili	t 427, Port	Charlotte, F	<u>-1.329</u> 52
				ده (ب
8. Name and street address of	Florida registered agent: (P.)	O. Box NOT accept	able)	. 23
Name: France	is X. Ennis, Jr.			~~ <u>~</u>
Office Address: 21405	Olean Blud, Unit	427		ස -
Port (Charlotte (City)	Florida <u>33</u>	<u>95a</u>	- 5
		(Zı	p code)	
9 Registered agent's accent	ance:			

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.

Jo X. Col.
(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	Name: Francis X. Ennis, Jr.	□Chairman	Name: Francis X. Ennis, Jr.		
□Vice Chairman	Address: 21405 Olean Blud.	□Vice Chairman	Address 21405 Olean Blud.		
□Director	Unit 427	Director	Unit 427		
□President	Port Charlotte, FL 33952	□President	Port Charlotte, FL 33952		
□ Vice President		□Vice President			
Secretary	Treasurer	□Secretary	□Treasurer		
2 00ther <u>C</u> 6 C	Other	∰Other <u>CFO</u>	Other		
□Chairman □Vice Chairman	Name: Francis X. Ennis, Jr. Address: 2405 Dean Blud	□Chairman	Name: Clara B. Ennis. Address: 21405 Dlean Blvd.		
□Director	Unit 427	□Director	Unit 427		
	Port Charlotte, FL 33952	□President	Port Char Lotte, FL 33952		
		□Vice President			
Secretary	□Treasurer	☐ Secretary	□Treasurer		
Other	Other	□Other	□Other <u>22</u>		
□Chairman	Name:	□Chairman	Name: 8		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director	<u> </u>		
□President		□President	చ్		
□Vice President		□Vice President			
□Secretary	Treasurer	Secretary	□Treasurer		
Other	Other	□Other	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. 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 f s.817.155, F.S.	alse information submitted in a document to the Depart	ment of State constit	utes a third degree felony as provided for in		
13. Frankis X Ennis Ur. (Typed or printed name and capacity of person signing application)					

Control Number: K901074

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

FXE, INC. a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

(ب

Docket Number : 18368262 Date Inc/Auth/Filed: 12/28/1998 Jurisdiction : Georgia Print Date : 01/16/2020

Form Number : 211



Brad Rafforsperger

Brad Raffensperger Secretary of State