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Requestor's Name)					
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Office Use Only



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COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT:	Grand Venture: Name of corporati	s. Inc.	
	Name of corporati	on - must include suffix	
Dear Sir or Madam	:		
"Certificate of Exis	lication by Foreign Corporation for tence," or "Certificate of Good Storeign corporation to transact busing	tanding" and check are sub	
Please return all cor	rrespondence concerning this mat	ter to the following:	
Jenn:	fer R Hall Name		
Grand	Ventures, Inc.		
	Firm/C	ompany	200
1013	SE 43'd Terran	<u> </u>	
	Ad	dress	:\)
Cape	Coral, FL 3 City/State	3904	
•	City/State	e and Zip code	:: 55
<u>jenc</u>	B-mail address. (to be use	d for future annual report	notification)
)	n-man address: (to be use	a for future annual reports	ionneation) 0.
For further informa	tion concerning this matter, pleas	e call:	
Jennifer	erson at (970)	531-0494	-
Name of P	erson Area C	ode Daytime Telep	hone Number
Registration Division of The Centre 2415 N. Mo	COURIER ADDRESS: In Section Corporations of Tallahassee onroe Street, Suite 810 e, FL 32303	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	iection orporations 7
Enclosed is a check Please make check pa \$70.00 Filing Fe	for the following amount: ayable to: FLORIDA DEPARTME se \$\forall \text{\$78.75 Filing Fee & Certificate of Status}	NT OF STATE ☐ \$78.75 Filing Fee & Certified Copy	 \$87.50 Filing Fee, 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.

1. Grand Ventures, Inc. (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)
2. Colorado 3. 84-1487793	
2. Colovado (State or country under the law of which it is incorporated) 3. 84-1487793 (FEI number, if app	licable)
4. 12/29/1998 5.	
4. 12/29/1998 5. (Date of incorporation) (Date of duration, if other the	nan perpetual)
6. 4/1/2020	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability	v)
	• '
7. 1013 SE 43'2 Terrace Cape Coral, FL 33 (Principal office street address)	704
(Tritespar Office <u>sector</u> address)	
(Current mailing address, if different)	
	23%
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	-
Name: <u>Jennifer Hall</u>	· >>
	
Office Address: 1013 SE 43 ¹² Terrace Cape Coral Florida 33904 (City) (Zip code)	- ·
Cape Coral Florida 33904	72: 3
(City) (Zip code)	C)

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.

(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: Jennifer Hall	□ Chairman	Name:				
□ Vice Chairman	Address: 1013 SE 4314 Terrace	□Vice Chairman	Address:				
□Director	Cape Coral, FL 33904	□Director		· · · · · · · · · · · · · · · · · · ·			
President		□President		<u> </u>			
□ Vice President		□Vice President					
Secretary	Treasurer	Secretary		□Treasurer			
□Other	Other	Other		□Other			
DCL:	Mama	□Chairman	Nama				
□ Chairman	Name:						
	Address:	□ Vice Chairman	Address:				
Director		□Director					
□President		□President					
□ Vice President		□ Vice President					
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer t~			
Other		Other		□Other □			
□Chairman	Name:	□ Chairman	Name:	<u>></u>			
	Address:	□Vice Chairman	Address:	<u>N</u> .			
□Director	<u> </u>	□Director		<u></u>			
□President		□President					
□Vice President		□Vice President		<u> </u>			
□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 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. <u>Jennifer R Hall - President</u> (Typed or printed name and capacity of person signing application)							

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.

GRAND VENTURES, INC.

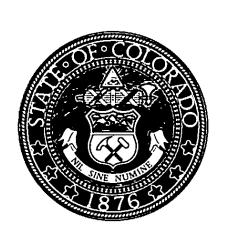
is a

Corporation

formed or registered on 12/29/1998 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 19981230066.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/16/2020 that have been posted, and by documents delivered to this office electronically through 04/17/2020 @ 11:53:28.

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 04/17/2020 @ 11:53:28 in accordance with applicable law. This certificate is assigned Confirmation Number 12254742



Jena Musuall
Secretary of State of the State of Colorado

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, vivit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."