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(Re	equestor's Name)			
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(Bu	usiness Entity Nan	ne)		
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APR 29 2020 M. SOLOMON

#### **COVER LETTER**

TO:	Registration Section Division of Corpora						
SUBJE	KKI Ventures	s, Inc					
GODOL		Name of corporation	- must include suffix				
Dear Si	r or Madam:						
"Certifi-	cate of Existence,"	by Foreign Corporation for or "Certificate of Good Star orporation to transact busine	nding" and check are sub	et Business in Florida," mitted to register the			
Please r	return all correspond	lence concerning this matter	r to the following:				
Erica Bo	otbol						
		Name of	Person				
Marshal	ll Reddick Real Estate	!					
	-	Firm/Con	npany				
4299 M	acArthur Blvd Suite I	05					
		Addr	ess	<u> </u>			
Newpor	t Beach, CA 92660						
		City/State a	ınd Zip code				
ebotbol	@marshallreddick.cor						
		E-mail address: (to be used:	for future annual report r	otification)			
For furt	ther information con	cerning this matter, please of	call:				
Erica Botbol 949 885			885-8182	5-8182			
_	Name of Person	Area Cod	le Daytime Telep	hone Number			
	STREET/COURI Registration Section Division of Corpor The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32	n ations ahassec reet, Suite 810	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7			
Please n		: FLORIDA DEPARTMENT	T 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	KKI 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)		
	California 27-1402624		
2.	(State or country under the law of which it is incorporated) (FEI number, if applicable)		
	November 25, 2009		
4.	(Date of incorporation)  (Date of duration, if other than perpetual)		
6.			
ν.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
-	601 Del Prado Blvd N #8 Cape Coral, FL 33990		
1.	(Principal office street address)		
		2020	
	(Current mailing address, if different)	9 APR	~~ <sub>{</sub>
8.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	ж 29	,
	Name: Travis Decere	T)	h/
0	Office Address: 601 Del Praw Blub. N. Ste8  Cape Cool , Florida 33907	1:36	أوسدة
	(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS			Tr.	ia DaCara			
□Chairman	Name:	□Chairman					
□Vice Chairman	Address: 4299 MacArthur Blvd Suite 105	□Vice Chairman					_
□Director	Newport Beach, CA 92660	□Director	Cape Co	oral, FL 33990			
□President		□President					
□Vice President		□Vice President	<del> </del>				
☐Secretary ☐	□Treasurer	Secretary		□Treasurer			
■Other <u>CEO</u>	Other	Other Managing	g Broker	□Other			
Chairman	Scott Pastel Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:	·			
□Director	Newport Beach, CA 92660	□Director	<u></u>			<del></del>	
□President		□President					
□Vice President		□Vice President		<del> </del>		<del>- 23</del> -	
■ Secretary	□Treasurer	☐ Secretary		□Treasurer		2028 APR	
□Other	Other	Other				R -₹9	
					위조 기업 기업	P2.	Ĭ
□Chairman	Name:	□Chairman	Name: _		.N. &	<del></del> -	. (
□Vice Chairman	Address:	□Vice Chairman	Address	:	37	36	
□Director		Director					
□President		□President					
□Vice President		□Vice President				<del>_</del>	
☐ Secretary	□Treasurer	□Secretary		□Treasurer			
□Other	Other	Other		□Other			•
Important Notice: individuals may b	Use an attachment to report more than six (6). The attached to the index when filing your Florida Dopartme	chment will be imag ent of State Annual R	ed for repo teport form	orting purposes only. N	on-inde	exed	
12	Signature of Director o						-
The officer or direction she is aware that s.817.155, F.S.	ector signing this document (and who is listed in numbe false information submitted in a document to the Depart	r 11 shove) aftirms (	that the fact tutes a third	ets stated herein are true d degree felony as prov	e and th rided fo	at he or or in	•

(Typed or printed name and capacity of person signing application)

13. Ross Nelson, CEO

### State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

KKI VENTURES, INC.

FILE NUMBER: FORMATION DATE:

C3261853 11/25/2009

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 24, 2020.

ALEX PADILLA Secretary of State



# See attached fems. Regulated you!! FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2020

**ERICA BOTBOL** MARSHALL REDDICK REAL ESTATE 4299 MACARTHUR BLVD., SUITE 105 NEWPORT BEACH, CA 92660

SUBJECT: KKI VENTURES, INC. Ref. Number: W20000036795

We have received your document for KKI VENTURES, INC and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon Regulatory Specialist II Supervisor

Letter Number: 120A00007788

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