بب

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000140785 3)))



H200001407853ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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

Email Addres				
KMAII AQQLUB	D :		 	

HAY 12 PH 4: 1

FOREIGN PROFIT/NONPROFIT CORPORATION Svelte Naturals, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

T GLASS

MAY 1 3 2020

Electronic Filing Menu

Corporate Filing Menu

Help

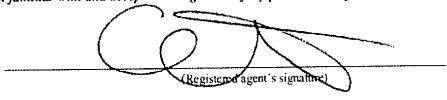
15612148442

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.

	orporation; must include "INCORPC orp," "Inc," "Co," or "Corp.")	DRATED," "C	OMPANY," "CORPORATION,"	
			t C. al	
			sted for the purpose of transacting business in F	iorida)
Delaware 3. (State or country under the law of which it is incorporated)			(FEI number, if applicable)	
	•			
·	05-11-2020		(Date of duration, if other than perpetual	
(Date	of incorporation)		(Date of duration, if other than perpetual)
			orida, if prior to registration)	
	(SEE SECTIONS 607.150	1 & 607.1502,	orida, if prior to registration) F.S., to determine penalty liability)	
	(SEE SECTIONS 607.150	1 & 607.1502,		······································
		1 & 607.1502, 1, FL 33401		.
319 Clematis	(SEE SECTIONS 607.150 St., Suite 1004, West Palm Beach	1 & 607.1502, n, FL 33401 (Principal c	F.S., to determine penalty liability)	
319 Clematis	(SEE SECTIONS 607.150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach	1 & 607.1502, 1, FL 33401 (Principal of th, FL 33401	F.S., to determine penalty liability)	
319 Clematis	(SEE SECTIONS 607.150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach	1 & 607.1502, 1, FL 33401 (Principal of th, FL 33401	F.S., to determine penalty liability) [fice address]	7. C.
319 Clematis 3	(SEE SECTIONS 607.150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach (Cu	1 & 607.1502, 1, FL 33401 (Principal of th, FL 33401 rrent mailing a	F.S., to determine penalty liability) ffice address) ddress, if different)	
319 Clematis 3	(SEE SECTIONS 607,150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach (Cu	1 & 607.1502, 1, FL 33401 (Principal of th, FL 33401 rrent mailing a	F.S., to determine penalty liability) ffice address) ddress, if different)	500
319 Clematis 3	(SEE SECTIONS 607.150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach (Cu	1 & 607.1502, 1, FL 33401 (Principal of th, FL 33401 rrent mailing a	F.S., to determine penalty liability) ffice address) ddress, if different)	
319 Clematis 319 Clematis Name and street Name:	(SEE SECTIONS 607.150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach (Cu et address of Florida registered a eResidentAgent, Inc.	1 & 607.1502, 1, FL 33401 (Principal of th, FL 33401 rrent mailing a	F.S., to determine penalty liability) ffice address) ddress, if different)	
319 Clematis 319 C	(SEE SECTIONS 607,150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach (Cu	1 & 607.1502, 1, FL 33401 (Principal of th, FL 33401 rrent mailing a	F.S., to determine penalty liability) ffice address) ddress, if different)	F); Q: 51
319 Clematis 319 Clematis Name and street Name:	(SEE SECTIONS 607.150 St., Suite 1004, West Palm Beach St., Suite 1004, West Palm Beach (Cu et address of Florida registered a eResidentAgent, Inc. 801 US Highway 1	1 & 607.1502, n, FL 33401 (Principal of h, FL 33401 rrent mailing a gent: (P.O. E	F.S., to determine penalty liability) ffice address) ddress, if different)	당

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; ___ Vice Chairman: Address: __ Director: Meredith Shirk Address: 319 Clematis St., Suite 1004, West Palm Beach, FL 33401 Director: __ Address: B. OFFICERS President: Meredith Shirk Address: 319 Clematis St., Suite 1004, West Palm Beach, FL 33401 Vice President: Secretary: Meredith Shirk Address: 319 Clematis St., Suite 1004, West Palm Beach, FL 33401 Treasurer: Michael R Johnson Address: 319 Clematis St., Suite 1004, West Palm Beach, FL 33401 NOTE: If necessary, you may attach an addendum 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.817.155, F.S.

13. Meredith Shirk

President

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "SVELTE NATURALS, 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 TWELFTH DAY OF MAY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SVELTE NATURALS, INC." WAS INCORPORATED ON THE ELEVENTH DAY OF MAY, A.D. 2020.

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

12 Fit 3: 50



Authentication: 202914260

Date: 05-12-20