

5/22/2020

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Florida Department of State  
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**FOREIGN PROFIT/NONPROFIT CORPORATION  
KASTEN BERRY, INC.**

Certificate of Status	0
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# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1501, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. KASTEN BERRY, 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. Kansas 3. 84-4448363  
 (State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 01/03/2020 5. \_\_\_\_\_  
 (Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
 (Date first transacted business in Florida, if prior to registration)  
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5454 W 110th, OVERLAND PARK, KS 66211  
 (Principal office address)

\_\_\_\_\_ (Current mailing address, if different)

## 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, 33324  
 (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.*

C T Corporation System  
 Christine Kaim  
 Assistant Secretary

By: Christine Kaim  
 (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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Lisa Burn

Address: 3203 W 118th St. South

Jenks, OK 74037

Director: Jake Williams

Address: 5454 W 110th

Overland Park, KS 66211

B. OFFICERS

President: Jake Williams

Address: 5454 W 110th, OVERLAND PARK, KS 66211

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Lisa Burn

Address: 3203 W 118th St. South Jenks, OK 74037

Treasurer: Lisa Burn

Address: 3203 W 118th St. South Jenks, OK 74037

NOTE: If necessary, you may attach as addendum to the application listing additional officers and/or directors.

12. [Signature]  
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.317.153, F.S.

13. Lisa Burn, Director/Treasurer  
(Typed or printed name and capacity of person signing application)

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**STATE OF KANSAS**  
**OFFICE OF**  
**SECRETARY OF STATE**  
**SCOTT SCHWAB**

I, SCOTT SCHWAB, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 9574187

Entity Name: KASTEN BERRY, INC.

Entity Type: KANSAS FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: C T CORPORATION SYSTEM

Registered Office: 112 SW 7th Street Suite 3C, TOPEKA, KS 66603

was filed in this office on January 03, 2020, and is in good standing, having fully complied with all requirements of this office.

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



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of May 22, 2020

**SCOTT SCHWAB**  
**SECRETARY OF STATE**

Certificate ID: 1137870 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.

2020 MAY 22 11:11 AM