## F2000004945

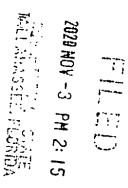
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Grue Permission to Add
COTP SUFFIX FORAME Mr. VINWITH 11/4/60 46
Mr. Unport 11/4/60 48
W20000106954

Office Use Only



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114/20



September 17, 2020

NATHANIEL VINCENT 87 FREEMONT TURN PALM COAST, FL 32137

SUBJECT: NATHAN'S FORGE, LTD.

Ref. Number: W20000106954

We have received your document for NATHAN'S FORGE, LTD. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

RECEIVED

OCT 28 2020

Letter Number: 820A00017770

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SURJECT: NATHAN'S FROME 41	D.
SUBJECT: NATHAN'S FORGE LIL Name of corporation - must	include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Author "Certificate of Existence," or "Certificate of Good Standing" a above referenced foreign corporation to transact business in Fl	and check are submitted to register the
Please return all correspondence concerning this matter to the	following:
NATHANIEL VINCENT	202
Name of Person	NON 85.02
NATHAN'S FORGE, LTD.	
NATHAN'S FORGE, LTD. Firm/Company	ω
BT EREEMONT TURN	
Address	D. 7.
PALM MAST EL 32137	<b>克</b> 州 <b>小</b>
City/State and Zip	code
PALM COAST FL 32137  City/State and Zip  Nick @ nathansforge . com  E-mail addless: (to be used for future)	
E-mail address: (to be used for futu	re annual report notification)
For further information concerning this matter, please call:	
NATHANIEL VINCENT at ( 410 )	596-1794
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations The Centre of Tallahassee	Division of Corporations P.O. Box 6327
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	Tallahassee, FL 32314
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF ST	TATE
□ \$70.00 Filing Fee	75 Filing Fee & S87.50 Filing Fee.  Gertificate 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.

			•	the purpose of t	C	···,
MARYL	AND y under the law of whic		5. 52	- 17208	43	
(State or countr	y under the law of whic	h it is incorporated)		(FEI num	ber, if applicab	ole)
2.	- 22 - (991 of incorporation)		5			
(Date	of incorporation)		(	Date of duration,	if other than pe	erpetual)
	22-2020					
		st transacted business NS 607.1501 & 607				
87	FREEMONT	TURN	PALM	COAST	FL 32	137
		(Principal o	ffice <u>street</u> a	idress)	40V -3	in the second se
		(Current mai	ling address.	if different)	PM 2:	1
			(2.12. 21/	T accontable)	77 31 -	-
Name and stree	t address of Florida r	egistered agent: (1	.O. Box <u>ivc</u>	<u>macceptable)</u>	(2) or	7
Name and stree Name:	t address of Florida r			<u>or</u> acceptable)		7
	NATHANIEL		<u>-</u>	<u>71   </u> acceptable)		י
Name:	NATHANIEL 87 FREE	VINCENT	en_		ア	י
Name:	NATHANIEL 87 FREE	. VINCENT	en_		ア	ר
Name: ffice Address:	NATHANIEL 87 FREE PALM CO	VINCENT	en_		ア	ר
Name: ffice Address:  Registered ago	NATHANIEL  87 FREE  PALM Control  ent's acceptance:	- VINCENT EMONT TU AST City)	<u>-</u> <u>-</u> . Flo	rida <u>3<b>2(3</b></u> (Zip code	<del>7</del> <del>1</del> :)	
Name:  ffice Address:  Registered ago aving been nam signated in this	NATHANIEL 87 FREE PALM CO	NINCENT  AST  City)  It and to accept serve accept the appoint	EN. Flo	rida <u>3213</u> (Zip code ess for the abo pistered agent o	7 c) ve stated corp and agree to a	ocration at the

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]:

☐Chairman	Name: NATHANIEL VIN	CENT	Name:
	Address: 87 FREEMONT		
Director	PALM COAST, FL		Address.
<b>☑</b> President		•	
□ Secretary	□Treasurer	 □Secretary	□Treasurer
Other	□Other	Other	□Other
□Chairman	Name:	Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President		□President	
□Vice President	A4.000	□Vice President	2920 NO
☐ Secretary	□Treasurer	□Secretary	UTreasurer
Other	Other		⊖ ⊖ Other over
□Chairman	Name:	Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		[IDirector	
□President		President	
□Vice President		TIVice President	
□Secretary	□Treasurer	□ Secretary	□Treasurer
□Other	□Other		□Other

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.

## STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM. THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

1 FURTHER CERTIFY THAT NATHAN'S FORGE, LTD. (D03168994), INCORPORATED FEBRUARY 22: 1991. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED. HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS AFRESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS OCTOBER 15, 2020.

8 NOV -3 PM 2:

Michael L. Higgs Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto, Metro (410) 767-1344 / Outside Balto, Metro (888) 246-5941 - 0012231088 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

CRTGST