Fd00000500

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	<u> </u>
— (Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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KUSINELL T

COVER LETTER

TO: Registration Sec Division of Cor				
	Café, Inc.			
80bJr.C.1;	Name of	corporation	- must include suffix	
Dear Sir or Madam:				
The enclosed "Applicate "Certificate of Existence above referenced foreign	e." or "Certificate of	f Good Stand	ding" and check are su	act Business in Florida," bmitted to register the
Please return all corresp Jasmine Barkum	ondence concerning	this matter	to the following:	
		Name of I	'erson	······································
Anderson Business Adv	risors —			
3225 McLeod Drive, Su	ite 100	Firm/Comp	Dany	
		Addre	88	
Las Vegas, Nevada 891	21			
	(City/State ar	id Zip code	
	E-mail address: (to be used f	or future annual report	notification)
For further information	concerning this mat	ter, please e.	all:	
Jasmine Barkum		800	706-4741	
Name of Person		Area Code	Daytime Tele	phone Number
STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations ! Center Circle		MAILING A Registration: Division of C P.O. Box 632 Tallabassee.	Section Forporations 17
Enclosed is a check for	the following amour	и:		
■ \$70.00 Filing Fee	☐ \$78.75 Filing F Certificate of S		\$78.75 Filing Fee & Certified Copy	S87.50 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.

	orporation; must include "INCORPORATED." "Corp." "Inc." "Co." or "Corp.")	OMPANY," "CORPO	RATION.			
Space 3 Café.						
Delaware	able in Florida, enter alternate corporate name ado	•	_			
(State or country under the law of which it is incorporated) 9/17/2020						
(Date of incorporation) 5.		(Date of duration, if other than perpetual)				
1417 Sadler Ro	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, ad Suite #412, Fernandina Beach, FL 32034			y)		
	(Principal c	office address)				
	(Current mailing a	ddress, if different)			<u></u>	
Name and stree	<u>.</u>					
Name and <u>stree</u>	(Current mailing a et address of Florida registered agent: (P.O. Florida Agents, Inc.		Ŷ.	K-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C		
Name:	et address of Florida registered agent: (P.O. F			Parties of the second s		
	Anderson Registered Agents, Inc. 12001 Research Parkway, Suite 236-K Orlando	Box <u>NOT</u> acceptable) 		=		
Name:	Anderson Registered Agents, Inc. 12001 Research Parkway, Suite 236-K	Box <u>NOT</u> acceptable) 		<u>-</u>		
Name: Tice Address: Registered ago wing been nam	Anderson Registered Agents, Inc. 12001 Research Parkway, Suite 236-K Orlando (City) ent's acceptance: and as registered agent and to accept service of	Box NOT acceptable) 32826 Cip cod of process for the abo	e ve stued	TO WAR CONFIDER	ration at the p	
Name: Tice Address: Registered agaving been names signated in this rther agree to c	et address of Florida registered agent; (P.O. Florida Anderson Registered Agents, Inc. 12001 Research Parkway, Suite 236-K Orlando (City)	32826	e) ve stuea and agre l complet	\frac{1}{\subseteq}	in this capac	
Name: Tice Address: Registered agoving been names signated in this orther agree to c	Anderson Registered Agents, Inc. 12001 Research Parkway, Suite 236-K Orlando (City) ent's acceptance: red as registered agent and to accept service of application. I hereby accept the appointment omply with the provisions of all statutes relations.	32826	e) ve stuea and agre l complet	\frac{1}{\subseteq}	in this capac	

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: Mohammad Hamzianpour 1417 Sadler Road Suite #412, Fernandina Beach, FL 32034 Address: _ John P. Gunn Director; 1417 Sadler Road Suite #412, Fernandina Beach, FL 32034 Address: _ **B. OFFICERS** Mohammad Hamzianpour President: 1417 Sadler Road Suite #412, Fernandina Beach, FL 32034 John P. Gunn Vice President: 1417 Sadler Road Suite #412, Fernandina Beach, FL 32034 Address: Mohammad Hamzianpour Secretary: 1417 Sadler Road Suite #412, Fernandina Beach, FL 32034 Address: John P. Gunn Treasurer: 1417 Sadler Road Suite #412, Fernandina Beach, FL 32034 NOTE: If necessary, you may attach an addengam to the application fisting 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 hereinare 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 \$.817.155, F.S.

Mohammad Hamzianpour, President

13. '



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

DELAWARE, DO HEREBY CERTIFY "SPACE 3 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 TWENTY-FOURTH DAY OF OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPACE 3 INC" WAS INCORPORATED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2020.

Authentication: 203932272

Date: 10-24-20