

F20000005093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

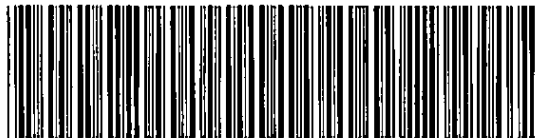
(Document Number)

Certified Copies _____ Certificates of Status _____

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T. LEVIEUX

COVER LETTER

TO: Registration Section
Division of Corporations
Infinite Sunshine, Inc.

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
James Bateman

	Name of Person
Infinite Sunshine, Inc	
Firm/Company	
26131 Palace Ln Unit 2020	
Address	
Bonita Springs, FL 34135	
City/State and Zip code	
jbatman316@yahoo.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

James Bateman	309	824-0621	
_____	at (_____)	_____	_____
Name of Person	Area Code	Daytime Telephone Number	

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- | | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certificate of Status & Certified Copy |
|--|---|--|---|



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2020

JAMES BATEMAN
26131 PALACE LN UNIT 202
BONITA SPRINGS, FL 34135

SUBJECT: INFINITE SUNSHINE INCORPORATED
Ref. Number: W20000124520

We have received your document for INFINITE SUNSHINE INCORPORATED and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 920A00021394

RECEIVED
NOV 23 2020

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.

Infinite Sunshine Incorporated

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "In.," "Co.," or "Corp.")

InSun Dealer Services *Inc.*

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. _____ 3. _____
Illinois 84-3982451
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. _____ 5. _____
12/16/2019
(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)

26131 Palace Ln Unit 202 Bonita Springs, FL 34135

7. _____
(Principal office street address)

26131 Palace Ln, Unit 202 Bonita Springs, FL 34135

(Current mailing address, if different)

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

James Bateman

Name:

26131 Palace Ln, Unit 202

Office Address:

Bonita Springs

34135

Florida

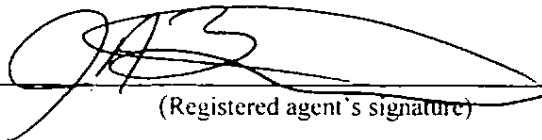
(City)

(Zip code)

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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.


(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors {up to six (6) total}:

A. DIRECTORS

James Bateman

- Chairman Name: _____
26131 Palace Ln. Unit 202
- Vice Chairman Address: _____
Bonita Springs, FL 34135
- Director _____
- President _____
- Vice President _____
- Secretary _____ Treasurer _____
- Other _____ Other _____

- Chairman Name: _____
- Vice Chairman Address: _____
- Director _____
- President _____
- Vice President _____
- Secretary _____ Treasurer _____
- Other _____ Other _____

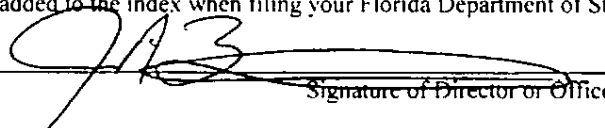
- Chairman Name: _____
- Vice Chairman Address: _____
- Director _____
- President _____
- Vice President _____
- Secretary _____ Treasurer _____
- Other _____ Other _____

- Chairman Name: _____
- Vice Chairman Address: _____
- Director _____
- President _____
- Vice President _____
- Secretary _____ Treasurer _____
- Other _____ Other _____

- Chairman Name: _____
- Vice Chairman Address: _____
- Director _____
- President _____
- Vice President _____
- Secretary _____ Treasurer _____
- Other _____ Other _____

- Chairman Name: _____
- Vice Chairman Address: _____
- Director _____
- President _____
- Vice President _____
- Secretary _____ Treasurer _____
- Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.  _____
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.

James Bateman- President

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

File Number

7259-501-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

INFINITE SUNSHINE, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON DECEMBER 13, 2019, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 6TH day of NOVEMBER A.D. 2020 .

Jesse White

SECRETARY OF STATE