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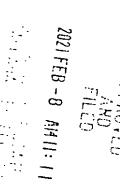
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## Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



### **ORDER FORM**

**TO** Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM |

Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 2/8/2021

**PRIORITY** Routine

OUR REF # (Order ID#) 889045

ORDER ENTITY TOP KNOT, INC. USA

		 -
PLEASE	PERFORM THE FOLLOWING SERVICES:	

TOP KNOT, INC. USA (FL)

File the attached foreign qualification document

NOTES:

\$70.00 Authorized

Email address for annual report reminders: Corinne@corp-smart.com

**RETURN/FORWARDING INSTRUCTIONS:** 

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, February 8, 2021 Page 1 of 1

## 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.

	IC. USA				
(Enter name of o	corporation; must include "INCORPORATED," corp," "Inc," "Co," or "Corp.")	' "COMPANY," "CORPORATION,	,,		
(If name unavai	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)		
NEW YORK		84-2136725			
(State or country under the law of which it is incorporated)		(FEI number, if applicable)			
JUNE 13, 2019	5				
(Date of incorporation)		(Date of duration, if other th	(Date of duration, if other than perpetual)		
UPON FILING					
C/O MARK E. P	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 ENA, ESQUIRE, ATTORNEY AT LAW, 432	• • •	•		
C/O MARK E, P	(SEE SECTIONS 607.1501 & 607.15 ENA, ESQUIRE, ATTORNEY AT LAW, 432	502, F.S., to determine penalty liability	•		
C/O MARK E. P	(SEE SECTIONS 607.1501 & 607.15 ENA, ESQUIRE, ATTORNEY AT LAW, 432 (Principal offi	502, F.S., to determine penalty liability 0 SO, MACDILL AVE, SUITE I, TA	•		
	(SEE SECTIONS 607.1501 & 607.15 ENA, ESQUIRE, ATTORNEY AT LAW, 432 (Principal offi	502, F.S., to determine penalty liability 0 SO. MACDILL AVE, SUITE I, TA ce street address) g address. if different) 0. Box NOT acceptable)	•		
. Name and stre	(SEE SECTIONS 607.1501 & 607.15 ENA, ESQUIRE, ATTORNEY AT LAW, 432  (Principal offi  (Current mailing) et address of Florida registered agent: (P.C.)	502, F.S., to determine penalty liability 0 SO. MACDILL AVE, SUITE I, TA ce street address) g address. if different) 0. Box NOT acceptable)	MPA FL 33611  ∴		
. Name and <u>stre</u> Name:	(SEE SECTIONS 607.1501 & 607.15 ENA, ESQUIRE, ATTORNEY AT LAW, 432  (Principal offi  (Current mailing) et address of Florida registered agent: (P.C.) NATIONAL REGISTERED AGENTS, INC.	502, F.S., to determine penalty liability 0 SO. MACDILL AVE, SUITE I, TA ce street address) g address. if different) 0. Box NOT acceptable)	MPA FL 33611		

#### 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.

Ky Carlier (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.

A. DIRECTORS					
Chairman	Nance: JOHN KELLAS	[]Chairman   1	Name:		
□Vice Chairman	Address: 1275 PAIRHILS DR.	□Vice Chairman	Address:		
OSSINING, NY 10567		Director			
President		□President			
□Vice President		□Vice President			
□ Secretary	□Treasurer	□Sccretary		☐Treasurer	
Other	Other	Other	·	ClOther	
□ Chairman	Name:	□Chairman :	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
☐Director		□Director			
□President		□President			
□Vice President		□Vice President			
☐Secretary	Treasurer	☐ Scoretary		☐ Treasurer	
Other	Other	□Other		Other	
Chairman	Name:	□ Chaiπnan	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□ Vice President			
☐Secretary	Treasurer	☐ Secretary		□Treasurer	
Other	Other	□Other		□Other	
Important Notice: individuals may be	Use an attachment to report more than six (6). The added to the intick when filing your Florida Dep	e attachment will be imaged artment of State Annual Rep	l for reporting port form.	purposes only. Non-indexed	
12	March 1			·····	
	Signature of Direc	ctor or Officer		· · · · · · · · · · · · · · · · · · ·	
The officer or dire she is aware that fas.817.155, F.S.	ctor signing this document (and who is listed in males information submitted in a document to the D	amber 11 above) affirms the epartment of State constitut	nt the facts states a third degr	ted herein are true and that he or ree felony as provided for in	
13	JOHN KELLAS- PRES				
	(Typed or printed name and capacity of	person signing application)	<del></del>	-	

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of TOP KNOT, INC. USA was filed on 06/13/2019, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of February two thousand and twenty-one.

Braden C Hylan

Brendan C. Hughes
Executive Deputy Secretary of State

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