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8/18/21



August 13, 2020

CECILIA LUKES 1875 CONNECTICUT AVE. NW SUITE:300 WASHINGTON, DC 20009

SUBJECT: KIT CHECK, INC. Ref. Number: W20000089330

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

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$900.00.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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 I

Letter Number: 620A00015374

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kit Check, Inc.	
——————————————————————————————————————	ation - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
Cecilia Lukes	202
Name Kit Check, Inc.	e of Person
Firm/0 1875 Connecticut Ave, NW Suite 300	Company SO P III
Washington DC 20009	ddress FINE 04
·	te and Zip code
cecilia.lukes@kitcheck.com F-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	• ,
Cecilia Lukes at (202	899-4274
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 DEPARTME \$\times \text{S70.00 Filing Fee} \text{ \$\begin{array}{c} \text{S78.75 Filing Fee & } \\ \text{Certificate of Status} \end{array}	NT OF STATE S78.75 Filing Fee & S87.50 Filing Fee. Certified Copy 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.

(Enter	neck, Inc	rporation; must include	"INCORPORA TED,	' "COMPANY," "CORPORATION,"		·
"Inc.,"	"Co" "Co	tp," "Inc." "Co," or "Co	orp.")			
(If nam		ole in Florida, enter alte	mate corporate name	adopted for the purpose of transacting bi	usiness in Flori	da)
2	or country	under the law of which	it is incorporated)	(FE! number, if applic	able)	
4		of incorporation)	5. 11/25/2014	(Date of duration, if other than	perpetual)	
6		(SEE SECTION	transacted business in IS 607.1501 & 607.15	n.Florida, if prior to registration) 02, F.S., to determine penalty liability)	SECRETALLA	T
same as	· · ·	Ave, NW Suite 300 Wa	· · · · · · · · · · · · · · · · · · ·	ce <u>street</u> address)	AN OF	
•			(Current-mailin	g address, if different)	STATE STATE	<u> </u>
8. Name a	and street	address of Florida reg	gistered agent: (P.O	. Box <u>NOT</u> acceptable)		
N	lame:	Kevin MacDonald		<u></u> .		
Office Ad	dress:	495 Brickell Ave #	5105			
٠	N	liami . (C	ity)_ ·	, Florida 3 3 1 3 1 (Zip code) -		
Having be designated urther ag	en name l in this a ree to con	opucation, I nereby a uply with the provision	iccept the appointm ons o fall statutes re	e o fprocess for the above stated cor ent as registered agent and agree to lative to the proper and complete pe ition as registered agent.	act in this co	macin I
		W	/h-5.			

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		•	
	Kevin MacDonald	□Chairman Na	ume:
□Vice Chairman	Address: 1875 Connecticut Ave NW	□Vice Chairman Ad	ddress:
□Director	Suite 300	□Director	
□President	Washington DC, 20009	□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	□Treasurer
CEO iii Other	_	□Other	_ □Other
□Chairman	Name:	□Chairman Nar	me:
D Vice Chairman	Address:	D Vice Chainnan Ac	ddress:
□Direct or	· ·	Director	2021 SEG TA
□President		□President	AUG AUG
□Vice President			- S - S
☐Secretary	[]Treasurer	□Secretary	Mrs I
□Other		□Other	≅≅
□Chairman	Name:	□Chairman Nar	ne;
□Vice Chair m an	Address:	□Vice Chairman Ad	ldress:
□Director		□Director	
□President _		⊡President	
□Vice President _		□Vice President	-
JSecretary -	· □Treasurer	☐Secretary	□Treasurer
□Other	_	□Other	_ Other
ndividuals may be a	se an attachment to report more than six (6). The added to the index when filing your Florida Depar	attachment will be imaged for tment of State Annual Repart	reporting purposes only. Non-indexed form.
. Kanala	MacDonald Signature of Director		

The officer or director signing this document (and who is listed in number II above) affirms that the facts said 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.

Kevin MacDonald, CEO

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

Page 1

I, JEFFREY M. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "KIT CHECK, INC." IS DULY INCORPORATED UNDER THE LANS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF CONVERSION", FILED THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2012, AT 5:15 O'CLOCK P.H.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE FIRST DAY OF JANUARY. A.D. 2013.

CERTIFICATE OF INCORPORATION, FILED THE TWENTY-FIRST DAY OF DECEMBER, A.D. -2012, AT 5:15 O'CLOCK P.H.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF INCORPORATION IS THE FIRST DAY OF JANUARY, A.D. 2013.

RESTATED CERTIFICATE, FILED THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2013, AT 8:39 O'CLOCK A.M.

5264782 8310 SR# 20212897921

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203856190

Date: 08-05-21