

	(Requestor's Name)
	(Address)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
☐ NOV. 115	C MAIT C MAI
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



400395416164

S. FRANKLIN **NCT 0 6 2022** 

## **CT CORP**

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	10/05/2022	711
		Acc#I20160000072	4: DW
Name:	JEAN LUX	XE, INC.	
Document #:			
Order #:	14559360		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Certified Copy of			202
Apostille/Notarial		Country of Destination:	्र -
Certification:		Number of Certs:	ن) 
Filing: 🚺	Certifie Plain: COGS:	ed: 🗸	7: E: 07
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amoun	nt: \$ 78.75	

Thank you!

## 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.

(If name unavailable Delaware (State or country unavailable Control of the Contro	oration: must include "INCORPORATED."  o," "Inc," "Co," or "Corp.")  e in Florida, enter alternate corporate name ad	lopted for th	he purpose of transacting b	
Octate or country u	•	-	• •	ousiness in Florida)
(State or country u	3	0002513		
1001/2010		7098712		
10/11/2019	inder the law of which it is incorporated)	(FEI number, if applicable)		
10/11/2016				
(Date of	incorporation)	(Date of duration, if other than perpetual)		
Upon filing				
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150			
2877 Paradise Road	, #702, Las Vegas, NV - 89109			
<u> </u>	(Principal office	street add	ress)	
	(Current mailing	address, if o	different)	
Name and street a	address of Florida registered agent: (P.O.	Box <u>NOT</u>	_acceptable)	
Name:	C T Corporation System			1872 (
ffice Address:	1200 South Pine Island Road			
	Plantation	FL	33324	رع
-	(City)	<u> </u>	(Zip code)	F 12: 0.
				12:
Registered agent	Us acceptance: Las registered agent and to accept service	o of neocos	se for the above stated c	⇔ ornoration at tNo <sup>1</sup> nle
aving been named signated in this a	oplication, I hereby accept the appointme	ent as regis	stered agent and agree:	to act in this capacit
rther agree to con	iply with the provisions of all statutes rel	ative to the	e proper and complete j	performance of my a
A Lam Camillian	ith and accept the obligations of my posi	tion as reg	zistered agent.	
ia i am jamuiar w			_	
aa c am jumular w	C T Corporation System CNUK	HUUNCUL .	Chystee Kelnt Resistant Secretary	
ia 1 am jamuiar w _ By	. , ,	tau væv/ ·	Chrysina Kaint Assistant Secretary	_

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

under the law of which it is incorporated.

•	•			
A. DIRECTORS				
<b>⊡</b> Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	Miami Beach, FL 33140	□Director		
■President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		□Other
□Chairman	Don Basile	□Chairman	Name	
□Vice Chairman	2877 Paradise Rd #702	□Vice Chairman		
□ Director	Address:Las Vegas, NV 89109	☐ Director		
□President		□President	•	
•		□Vice President		
				_
□Secretary	□Treasurer	□Secretary		□Treasurer
□Other	□Other	□Other		□Other
□Chairman	Name;	□Chairman	Name:	7972
□Vice Chairman	Address:	□ Vice Chairman	Address:	- - l
□Director		□Director		
□President		□President		. 12:0
□Vice President		□Vice President		<u>2</u>
□Secretary	□Treasurer	□Secretary		☐Treasurer
Other	□Other	□Other		Other
	Use an attachment to report more than six (6). The atta added to the index when filing your Florida Departme Donald Basile			urposes only. Non-indexed
12	Signature of Director of	or Officer	<del></del> :-	
The officer or dire she is aware that fas.817.155, F.S.	etor signing this document (and who is listed in number alse information submitted in a document to the Depart	r 11 above) affirms th	nat the facts state ates a third degre	d herein are true and that he or e telony as provided for in



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

DELAWARE, DO HEREBY CERTIFY "JEAN LUXE, 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-EIGHTH DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2022 6 -5 1 -12



Authentication: 204500750

Date: 09-28-22