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(F	Requestor's Name)	
	Address)	
(~	address;	
(A	Address)	
	City/State/Zip/Phone #)	
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PICK-UP	MAIT	MAIL
(É	Business Entity Name)	
(0	Document Number)	
		-
Certified Copies	Certificates of	Status
Special Instructions to F	Filing Officer:	•
Special instructions to r	ining Officer.	

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

IAPPY LIL THING	INC		
		_	~
			
		X	Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy
		¥	Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature	·	-	Fictitious Owner Search
L			Vehicle Search
	· 		Driving Record
Requested by:			UCC 1 or 3 File
Name	Date Time		UCC 11 Search
			UCC 11 Retrieval
Walk-In Species & Act	Will Pick Up		Courier

COVER LETTER

_	tration Section ion of Corporations			
SUBJECT:	HAPPY I.II. THING INC			
Sobolic I.	Name	e of corporation	- must include suffix	
Dear Sir or M	adam:			
"Certificate o	"Application by Foreign C f Existence," or "Certifica ced foreign corporation to	te of Good Stan	ding" and check are sub	
Please return	all correspondence concer	ning this matter	to the following:	
MARCOS RE	ZENDE			
		Name of	Person	
CSG - CAPITA	AL SERVICES GROUP, IN	С.		
		Firm/Com	pany	
1191 E NEWP	ORT CENTER DR #103			
		Addre	ess	
DEERFIELD I	BEACH - FL 33442			
	· · · · · · · · · · · · · · · · · · ·	City/State at	nd Zip code	
CSG@THEW.	AYGROUP.BIZ			
	E-mail addre	ss: (to be used f	or future annual report i	notification)
For further in	formation concerning this	matter, please c	all:	
MARCOS		954 at (427-4770	
Nam	e of Person	Area Code	Daytime Telep	hone 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		
	check for the following an eck payable to: FLORIDA I ng Fee \$78.75 Fili Certificate	DEPARTMENT ing Fee & □	OF STATE I \$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.

07/22/2020	w of which it is incorporated) 5	5-2117268 (FEI number, if a	pplicable)
(Date of incorporate			pplicable)
	ion)		
·		(Date of duration, if other	than perpetual)
(SEI 11057 SEAPORT LN	(Date first transacted business in F E SECTIONS 607,1501 & 607,1502		lity)
BOCA RATON - FL 33428	(Principal office	street address)	
	(Current mailing a	address, if different)	~~ ~~
	Florida registered agent: (P.O. I PITAL SERVICES GROUP, INC.	Box NOT acceptable)	2022 OCT -6 CECRETAL FALLARASSI
Office Address:	WPORT CENTER DR #103		
	.D BEACH	, Florida	PH 12: 21
	(City)	(Zip code)	24

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.

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

A. DIRECTORS	•			
□ Chairman	Name: DANIELLE LEE	□Chairman	Name:	
□Vice Chairman	Address: 11057 SEAPORT LN	□Vice Chairman	Address:	
Director	BOCA RATON, FL - 33428	□Director		55 n.
President		□President		-
□Vice President		□Vice President		
□Secretary	□Tieasurer	☐ Secretary		□Treasurer
Other	□Other	□Other		Other
□Chairman □Vice Chairman	Name:Address:	□Chairman □Vice Chairman	Address:	
□Director □President	**************************************	□Director		
□ Vice President		□President □Vice President		
□ Secretary	□ Treasurer	☐ Vice President ☐ Secretary		☐Treasurer
□ Other		□ Other		Other
□ Chairman	Name:	☐ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		·
□President		□President		
□Vice President		□Vice President		· · · · · · · · · · · · · · · · · · ·
ElSecretary	□Treasurer	□Secretary		□Treasurer
Other	□Other	□Other		Other
12. <u>Daniel</u> The officer or direct	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Departmuse Lee Signature of Director signing this document (and who is listed in numbelse information submitted in a document to the Department).	or Officer or I I above) affirms the	eport form,	ed herein are true and that he or
DANIELLE I	.EE			

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HAPPY LIL THING 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 SIXTH DAY OF OCTOBER, 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 SAID "HAPPY LIL THING INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF JULY, A.D. 2020.

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

at corp. delaware gov/aut

Authentication: 204565696

Date: 10-06-22