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S. FRANKLIN

JAN - 6 2021

## **COVER LETTER**

		ration Section on of Corporations						
SUBJE	CT:	Young Honey PC INC						
		Name of	fс	orporation -	nust ii	nclude suffix		<del> </del>
Dear Sir	or Ma	adam:						
"Certific	ate of	'Application by Foreign Corp Existence," or "Certificate of the ded foreign corporation to tra	f	Good Standii	ıg" an	d check are submitt		
Please re	turn a	ill correspondence concerning	g	this matter to	the fo	llowing:		
Ramaj Yo	oung							
				Name of Pe	rson			
Young He	oney I	PC INC						
				Firm/Compa	ny	_		7527 [1-
7917 SW	104th	st. Apt. F101						<del>-</del>
				Address				
Miami, F	lorida	33156						<del></del>
	•		C	ity/State and	Zip co	ode		4 <u>.</u>
younghor	neycat	ering@gmail.com			_			
		E-mail address:	(t	be used for	future	annual report notif	ication)	<u>~</u>
For furth	er inf	formation concerning this ma	tte	er, please call	:			
Ramaj Young			et (612		5012922			
	Name	of Person		Area Code		Daytime Telephone	Number	<del></del>
ן נ 1 2	Regist Divisi The C 2415 1	ET/COURIER ADDRESS ration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	:			MAILING ADDI Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on rations	
	ike ch	check for the following amount to the character of the character for the character f	P#	RTMENT O	<b>78.7</b> 5		\$87.50 Fi Certificat Certified	e of Status &

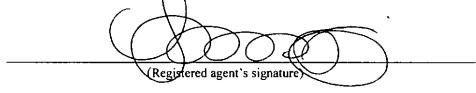
# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

Young Honey P	CINC						
	orporation; must include "INCORPORATED, orp," "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORATION,	,				
Young Honey P	C Miami Inc.						
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida				
2. Minnesota	3	3. 85-1527053					
	y under the law of which it is incorporated)	(FEI number, if applicable)					
4. June 9th 2020	5.						
	of incorporation)	(Date of duration, if other than	an perpetual)				
6. NA							
		n Florida, if prior to registration) 502, F.S., to determine penalty liability	)				
7917 SW 104th st	apt. F101, Miami, Florida 33156						
,		ice street address)	~ 3				
	(Current mailir	ng address, if different)	· · · · · · · · · · · · · · · · · · ·				
	et address of Florida registered agent: (P.C Ramaj Young	D. Box <u>NOT</u> acceptable)	19 811 1:03				
Name:		<del></del>					
Office Address:	7917 SW 104th st apt. F101		2				
	Miami	, Florida					
	(City)	(Zip code)					

#### 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.



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	·						
<b>☑</b> Chairman	Name:	Chairman	Name:				
□Vice Chairman	7917 SW 104th st apt. F101 Address:	□Vice Chairman	Address:	···			
□Director	Miami, Florida 33156	□Director					
□President		President					
□Vice President		□ Vice President					
Secretary	□Treasurer	Secretary		Treasurer			
□Other	Other	Other		Other			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□ Vice Chairman	Address:	-			
□Director		□Director					
□President		□President					
□Vice President		□ Vice President		<u> </u>			
□Secretary	☐ Treasurer	□Secretary		reasurer			
Other	Other	Other		Other			
				Pi			
□Chairman	Name:	□ Chairman	Name:	<u> </u>			
□Vice Chairman	Address:	□Vice Chairman	Address:	က			
Director		□Director					
□President		□President					
□Vice President		□ Vice President					
☐ Secretary	□Treasurer	☐ Secretary		Freasurer			
Other		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.							
13	(Typed of printed name and capacity of person	on cionina analization	`				
	( ryped or printed name and capacity of perso	u signing application	,				

### Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

Young Honey PC, Inc.

Date Filed:

04/07/2021

File Number:

1227611000059

Minnesota Statutes, Chapter:

302A

Home Jurisdiction:

Minnesota

This certificate has been issued on:

11/09/2022



Steve Pinnon

Secretary of State State of Minnesota