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(((H23000139232 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number : I20220000070 Phone : (888)462-3453 : (877)919-2613 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: EFILE1234@INCFILE.COM

### FOREIGN PROFIT/NONPROFIT CORPORATION **NEVER SHIPPED CORP**

Certificate of Status	1
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### **COVER LETTER**

TO:	Registration Section Division of Corpor					
SUBJECT: NEVER SHIPPED CORP						
1,012		Name of corporatio	n - must include suffix			
Dear	Sir or Madam;					
"Cert	ificate of Existence,"	by Foreign Corporation for or "Certificate of Good Sta orporation to transact busin	nding" and check are sub			
Please	return all correspond	dence concerning this matte	er to the following:			
Lov	ette Dobson					
		Name of	Person			
		Firm/Cor	npany			
173	50 State Hwy					
		Addı	ress			
Ηοι	uston, TX 7706					
		•	and Zip code			
EFI	<u>LE1234@INC</u>	FILE.COM E-mail address: (to be used				
		E-mail address: (to be used	for future annual report r	notification)		
For fi	irther information cor	icerning this matter, please	call:			
Lov	Lovette Dobson at (1 ) 888-462-3453					
.=	Name of Person		de Daytime Telep			
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration S Division of Co P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Please		; FLORIDA DEPARTMEN	T OF STATE  □ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy		

under the law of which it is incorporated.

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA (((H23000139232 3)))

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.

(F	HIPPED CORP			
	orporation; must include "INCORPORATED orp." "Inc." "Co," or "Corp.")	)," "COMPANY," "CORPORATION,"		
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)		
·		92-3301420		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
03/31/2023		Perpetual		
(Date of incorporation)		(Date of duration, if other than perpetual)		
	(Date first transported business	in Florida, if prior to registration)		
		1502, F.S., to determine penalty liability)		
1150 Nw 7	2nd Ave Tower I Ste 455#	10174, Miami, FL 33126		
		fice street address)		
	(Current mail	ing address, if different)		
Name and street	t address of Florida registered agent: (P.	O. Box NOT acceptable)		
Name: REPUBLIC REGISTERED AGENT LLC				
Name:	1121 00210 1121121	<del></del>		
	1150 Nw 72nd Ave Tower I	Ste 455		
		<del></del>		
	1150 Nw 72nd Ave Tower I	Ste 455  . Florida 33126 (Zip code)		
Office Address:  Registered ago laving been namesignated in this	1150 Nw 72nd Ave Tower I  Miami (City)  ent's acceptance: ed as registered agent and to accept serve application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my p	Florida 33126 (Zip code)  vice of process for the above stated corporation at the place timent as registered agent and agree to act in this capacity relative to the proper and complete performance of my dissistion as registered agent.		
ffice Address: Registered ago laving been namesignated in this	1150 Nw 72nd Ave Tower I  Miami (City)  ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint comply with the provisions of all statutes	Florida 33126 (Zip code)  vice of process for the above stated corporation at the place timent as registered agent and agree to act in this capacity relative to the proper and complete performant of my disorition as registered agent.		
Office Address:  Registered ago laving been nam esignated in this arther agree to c nd I am familiar	1150 Nw 72nd Ave Tower I  Miami  (City)  ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint comply with the provisions of all statutes with and accept the obligations of my p  Wesley 7  (Registered agent's	Florida 33126 (Zip code)  vice of process for the above stated corporation at the place timent as registered agent and agree to act in this capacity, relative to the proper and complete performance of my due osition as registered agent.		

### 4/14/2023 08.42:59 CDT A. DIRECTORS

4.817.155, f.S.

## (((ロとういいい 1ンラムシム ン))) Paga: 4/5

i <sup>m</sup> Chairman	Name: Robert Nikic	ClChajtman	Name,				
∐Vice Chairman	Address:	LaNice Chairman					
<b>⊠</b> Director	200 Continental Dr Ste 401	DDirector					
<b>⊠</b> President	Newark, DE 19713	∐President					
IIIV ice President		□Vice President					
x. Secretary	AT reasurer	USceretary		(D) Freasurer			
'. Other	Other	."Other ⊥		L'Other			
.TChairman	Name:	□Chairman	Name.				
"Niec Chairman	Address:	LIN (cc Chairman	Address:				
<b>Director</b>							
UlPresident		ElPresident					
Wice President		EIV ice President		<del></del>			
☐ Secretary	□'i reasurer	El Secretary		⊟Treasurer			
LiOther	□ Cuther	□ClOther		F)Other			
E:Chairman	Name:	□Chairman	Name:				
(TVice Chairman	Address:	□ Vice Chairman	Address:				
Diffector		<b>CiDirector</b>		·			
(L)President		□President					
LiVice President		ENice President					
□ Secretary	(1) Freasurer	II Secretary		[]Treasurer			
COther	Other	(2)Other	<del></del>	□Other			
Important Notice: Use an attachment to report more than six (o). 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 beted in number 11 above) affirms that the facts stated herein are true and that he or							
The officer or direc	tor signing this document rand who is listed in number	III above) affirms that	it 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 Robert Nikic - President

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

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

DELAWARE, DO HEREBY CERTIFY "NEVER SHIPPED CORP" 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 TWELFTH DAY OF APRIL, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NEVER SHIPPED CORP" WAS INCORPORATED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2023.

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

Authentication: 203127755

Date: 04-12-23