# F23000003147

(Requestor's Name)					
(Address)					
(Address)					
(Houress)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Socialient Nomber)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



500408693935

ng mil bilanin - - 12 mm

RECEIVED NAY 1 5 2023

SECRETARY OF STATE

### **COVER LETTER**

TO:	O: Registration Section Division of Corporations				
SUBJI	FCT.	BRANDT ACCOUNTING INC	•		
3000	ECT.	Name of	corporation	- must include suffix	
Dear S	ir or M	adam:			
"Certif	icate of		Good Stan	Authorization to Transact Business in Florida." ding" and check are submitted to register the ss in Florida.	
Please	return	all correspondence concerning	this matter	to the following:	
JEAN !	BRANI	TC			
			Name of	Person	
BRAN	DT AC	COUNTING INC			
		· · · · · · · · · · · · · · · · · · ·	Firm/Com	pany	
7019 R	IVER F	HAMMOCK DRIVE #307			
			Addro	ess	
BRAD	ENTON	S, FL 34212			
	-	(	City/State a	nd Zip code	
jean@t	orandtac	countinginc.com			
		E-mail address: (	to be used f	or future annual report notification)	
For fur	ther in	formation concerning this mat	ter, please c	all:	
JEAN I	BRANL	ame of Person at $(\frac{847}{\text{Area Code}})$ $\frac{416.0076}{\text{Daytime Tel}}$		416,0076	
•	Name	e of Person	Area Cod	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	
	nake ch	check for the following amount eck payable to: FLORIDA DEP ng Fee	ARTMENT Fee & 5	OF STATE  \$78.75 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.

BRANDT ACC	OUNTING INC		
	orporation; must include "INCORPORATED." * orp," "Ine," "Co," or "Corp.")	COMPANY," "CORPORATION	1,
BRANDT ACC	OUNTING AND TAX INC		
(If name unavaila	able in Florida, enter alternate corporate name ado	opted for the purpose of transactin	g business in Florida)
ILLINOIS	3 8	81-2022391	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
MARCH 27, 20	16		
	of incorporation)	(Date of duration, if other than perpetual)	
ESTIMATED J	UNE 15TH, 2023		
7019 RIVER HA	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1503 MMOCK DRIVE #307, BRADENTON, FL 342 (Principal office	2, F.S., to determine penalty liabili 12	iv.)
330 MALLARD	PT, LAKE BARRINGTON, IL 60010		
Name and street Name:  Office Address:	(Current mailing a cet address of Florida registered agent: (P.O. I JEAN BRANDT 7019 RIVER HAMMOCK DRIVE #307	nddress, if different)  Box <u>NOT</u> acceptable)	2023 HAY 15 PH SECRETHAY DE TALLAHASSEE
Antee Audioss.	BRADENTON	34212	STATE OF THE STATE
	(City)	, Florida (Zip code)	
	(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.

Gregistered agent's signature)

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.

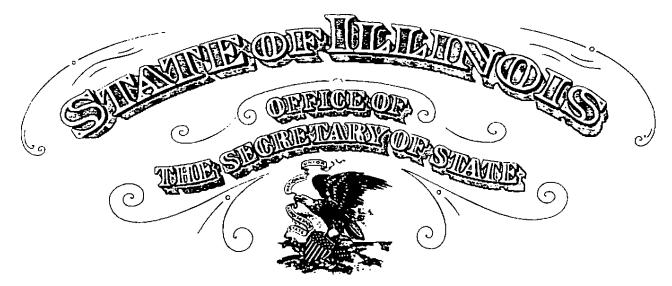
#### A. DIRECTORS WILLIAM BRANDT JEAN BRANDT □Chairman □ Chairman □ Vice Chairman ☐ Vice Chairman Address: \_\_\_ Address: \_\_\_ 7019 RIVER HAMMOCK DRIVE #307 7019 RIVER HAMMOCK DRIVE #307 □ Director □ Director BRANDENTON, FL 34212 BRANDENTON, FL 34212 □President President ■ Vice President □ Vice President ☐ Treasurer ☐ Treasurer □ Secretary □ Secretary □Other \_\_\_\_\_ □ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_ □Other \_\_\_\_ Name: \_\_\_\_\_ □ Chairman Name: \_\_\_\_\_ □ Chairman □ Vice Chairman Address: \_\_\_\_\_ □ Vice Chairman Address: \_\_\_\_\_ □ Director □ 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 □ Secretary ☐Treasurer □ Secretary □Treasurer □Other\_\_\_\_ □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. 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.

JEAN BRANDT

13.

#### File Number

7061-396-4



## To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

## Department of Business Services. I certify that

BRANDT ACCOUNTING INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 27, 2016, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 8TH

day of

MAY

A.D.

2023

Authentication #: 2312802440 verifiable until 05/08/2024
Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE