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COVER LETTER

, **TO**:

TO:	Registration Section Division of Corporation	ıs				
SUBJE	Inky Enterprises, LL	.C				
CODGI		Name of L	imited Liability C	Company		-
		eign Limited Liability Comp d to register the above refere				
Please	return all correspondence c	oncerning this matter to the t	ollowing:			
	James Incledon	, Jr.				
	<u></u>	Na	me of Person		 	-
Inky Enterprises, LLC						
Firm/Company						-
15801 Kilmarnock Dr						
Address						-
	Fort Myers, FL	33912				
City/State and Zip Code						-
	james@inkyenter	prises.com				
		E-mail address: (to be used	for future annual	report not	ification)	-
For fur	ther information concerning	g this matter, please call:				
	James Incledon, Jr.		847 at (551-13	13	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	-
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding ceutive Center Circle ice, FL 32301	
Enclose	ed is a check for the follown \$125.00 Filing Fee	ing amount: \$\Bigsim \\$130.00 \text{ Filing Fee & Certificate of Status}	☐ \$155.00 Filir Certified Copy	ng Fee &	\$160.00 Filing Fee, Cof Status & Certified Co	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Inky Enterprises, LLC		· · · · · · · · · · · · · · · · · · ·				_
(Name of Fore	ign Limited Liability Company	r, must include "Limit	ed Liability Company," "L.L.C.,"	or "LLC,")		
(If name unavailable, enter al Liability Company," "L.L.C,"		rpose of transacting b	ousiness in Florida. The alternate n	ame must inc	lude "Lin	– nited
2. Illinois		3. 26-437	9177			
(Jurisdiction under the law company is organized)	of which foreign limited liabilit	iy	(FEI number, if applicab	le)		-
4. 9/22/2016	(Date first transacted b	usiness in Florida, if p	prior to registration.)	_		
5. 15801 Kilmarnock Dr	(See sections 605.0904 &	: 005.0905, F.S. to ge	termine penalty (lability)			
Fort Myers, FL 33912		. =		_	;	
	(Street Addres	s of Principal Office)			र्ने	
6. 15801 Kilmarnock Dr					33	
Fort Myers, FL 33912				<u> </u>	6 SEP 29	TI
-	(Mai	ling Address)				— TI
7. Name and street addres	s of Florida registered agent	: (P.O. Box <u>NOT</u> a	acceptable)	三氮		T D
Name:	James Incledon, Jr.			윘	AM 11: 36	
Office Address:	15801 Kilmarnock Dr			¥m	9	
	Fort Myers		, Florida 33912			
	(City	y)	(Zip code)			
designated in this applicate to complywith the provision	gistered agent and to accept ion, I hereby accept the app ons of all statutes relative to my position as registered ag	pointment as registed the proper and con ent.	for the above stated limited lia ered agent and agree to act in a mplete performance of my duti	this capacit	y. I furti	her agree
	ge g	egistered agent's sign	ature)			
8. The name, title or capa	city and address of the perso	on(s) who has/have	authority to manage is/are:			
James Incledon, Jr Memb	per 15801 Kilmarnock Dr	Fort Myers, FL 331	2	. <u> </u>	_	
Anna Incledon Member	15801 Kilmarnock Dr For	t Myers, FL 3312				
					•	
	of which it is organized. (If the britted)		thenticated by the official havin foreign language, a translation			
This dogument is accessed	7	$I \setminus I$		6:1- : :: 6		
			orida Statutes. I am aware that a ee felony as provided for in s.8			
	James Incledon, Jr.					

Typed or printed name of signee



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, 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

INKY ENTERPRISES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 02, 2009, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY 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 21ST day of SEPTEMBER A.D. 2016.

Authentication #: 1626600664 verifiable until 09/21/2017
Authenticate at: http://www.cyberdriveillinois.com

Jesse White

SECRETARY OF STATE