

115000006943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Per instructions from management
file as Florida
non profit.

JUL 20 2015

T. SCOTT



000274421850

07/20/15--01001--002 **78.75

15 JUL 20 AM 8:01

COVER LETTER

TO: Chief of Bureau of Commercial Recording
Division of Corporations

SUBJECT: EAGLE EYE
(Name of Foreign Unincorporated Association)

Dear Sir or Madam:

The enclosed "Application by Foreign Unincorporated Association for Authorization to Transact Business in Florida," duly authenticated copy of its written Articles of Association, and check are submitted to register the above referenced foreign unincorporated association to transact business in Florida.

Please return all correspondence concerning this matter to the following:

YAMAGUSTO WAYA
(Name of Person)
EAGLE EYE
(Firm/Company)
1023 N. Liberty Street
(Address)
JACKSONVILLE FL 32206
(City/State and Zip code)

For further information concerning this matter, please call:

YAMAGUSTO WAYA at (904) 402-1177
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Chief of Bureau of Commercial Recording
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Chief of Bureau of Commercial Recording
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

\$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

\$78.75 Filing Fee &
Certified Copy

\$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN UNINCORPORATED ASSOCIATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 622.03, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN UNINCORPORATED ASSOCIATION TO
TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. EAGLE EYE of Florida, Inc.

(Enter name of Foreign Unincorporated Association)

(If name unavailable in Florida, enter alternate name adopted for the purpose of transacting business in Florida)

2. Wyoming

(State, Territory, or Possession of U.S.A.)

3. 47-4035323

(FBI number, if applicable)

4. 06/11/2015

(Date of Organization)

5. perpetual

(Duration: Year association will cease to exist or enter "perpetual")

6. To Be Determined

(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, P.S., to determine penalty liability)

7.

1023 N Liberty Street
JACKSONVILLE FL 32206

(Principal office address)

1023 N LIBERTY Street
Jacksonville FL 32206

(Current mailing address)

8. Transacting Business Obligations in Florida

(Purpose(s) of unincorporated association authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

YAMAGUSTO WAGA

Office Address:

1023 N. LIBERTY STREET

JACKSONVILLE

(City)

Florida 32206

(Zip code)

10. 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.

Yamagusto Waga
(Registered Agent's Signature)

15 JUL 20 AM 8:01

11. Attached is a copy of the written articles of association 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 Association's records in the jurisdiction under the law of which it is organized.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: YAMAGUSTO WAYNE
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

Vice Chairman: Otis Stallworth Jr
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

Director: WAYNE T.
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

Director: RODRICK TSISQUA
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

B. OFFICERS

President: YAMAGUSTO WAYNE
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

Vice President: RODRICK TSISQUA WAYNE T.
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

Secretary: WAYNE T. RODRICK TSISQUA
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

Treasurer: Otis Stallworth Jr
 Address: 7200 MIMOSA Grove Trails West
Jacksonville FL 32210

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Otis Stallworth Jr
 (Signature of Director or Officer listed in number 12 of the application)

14. Otis Stallworth Jr. Vice Chairman
 (Typed or printed name and capacity of person signing application)