

**F15000003295**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

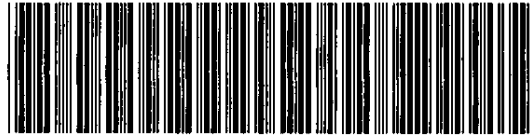
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
  
  
  
  
  
  
  
  
*W15-31816*

Office Use Only



**300272180383**

04/28/15--01004--007 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JUL 27 PM 1:10

APPROVED  
AND  
FILED

*[Handwritten signature]*

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** GEKKA EHF, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

**SIMON B. HOWELL**

Name of Person

**HOWELL INTERNATIONAL TAX**

Firm/Company

**8701 W. IRLO BRONSON MEMORIAL HWY**

Address

**KISSIMMEE, FLORIDA 34747**

City/State and Zip code

**SIMON.HOWELL@HOWELLINTERNATIONALTAX.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**SIMON B. HOWELL** at ( 407 ) 245-7600

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 20, 2015

SIMON B. HOWELL  
HOWELL INTERNATIONAL TAX  
8701 W. IRLO BRONSON MEMORIAL HWY  
KISSIMMEE, FL 34747

SUBJECT: GEKKA EHF, INC.  
Ref. Number: W15000031816

We have received your document for GEKKA EHF, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

The entity's date of incorporation/organization must be listed in the document.

\*\*\*\*Please provide a certificate issued in "2015".

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 115A00009299

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.

1. GEKKA EHF, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. ICELAND

(State or country under the law of which it is incorporated)

3. 98-1239881

(FEI number, if applicable)

4. OCTOBER 18, 2007

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. LAUFASVEGI 65, 101 REYKJAVIK, ICELAND

(Principal office address)

LAUFASVEGI 65, 101 REYKJAVIK, ICELAND

(Current mailing address)

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

Name: SIMON B. HOWELL

Office Address: 8701 W. IRLO BRONSON MEMORIAL HWY

SITE 100, KISSIMMEE, Florida 34747

(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.

SIMON B. HOWELL

(Registered 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.

15 JUL 27 PM 1:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

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AND  
FILED

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

**A. DIRECTORS**

15 JUL 27 PM 1:10

Chairman: AOALSTEINN EGILL JONASSON  
Address: SMARAFLOT 22, 210 GAROABAER, ICELAND

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Vice Chairman: ASDIS HALLA BRAGADOTTIR  
Address: SMARAFLOT 22, 210 GAROABAER, ICELAND

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

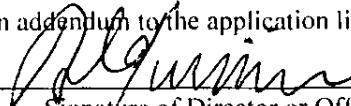
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

12. \_\_\_\_\_

  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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. AOALSTEINN EGILL JONASSON, CHAIRMAN

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

APPROVED  
AND  
FILED

15 JUL 27 PM 1:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# RSK

- Register of Enterprises -

Laugavegi 166, 150 Reykjavík, Iceland - Tel: +354 442-1250, Fax: +354 442-1279

## Certificate of Registration

**Gekka ehf.**

Aðalsteinn Egill Jónasson  
Postal Address: Laufásvegi 65  
101 Reykjavík

ID-nr: 561007-1600

Domicile: Laufásvegi 65  
101 Reykjavík

Issued: 10.7.2015

Date of Articles of Association: 18.6.2015

**Company's Board of Directors according to a meeting on: 18.10.2007:**

181266-4309 Aðalsteinn Egill Jónasson, Laufásvegi 65, 101 Reykjavík, *Chairman*  
060768-4049 Ásdís Halla Bragadóttir, Laufásvegi 65, 101 Reykjavík, *Reserve Director*

**Management:**

060768-4049 Ásdís Halla Bragadóttir, Laufásvegi 65, 101 Reykjavík

**Power of Procuration:**

060768-4049 Ásdís Halla Bragadóttir, Laufásvegi 65, 101 Reykjavík  
181266-4309 Aðalsteinn Egill Jónasson, Laufásvegi 65, 101 Reykjavík

**Auditors:**

590975-0449 KPMG ehf., Borgartúni 27, 105 Reykjavík

Share capital: ISK 500.000

Signatures: Director

Restrictions on the handling of shares: Yes

Liability for redemption of shares: No

**Activity code:**

64.20.0 Activities of holding companies

Form of operation: Private limited company

Reykjavík, 10.07.2015

  
Trausti B. Traustason

