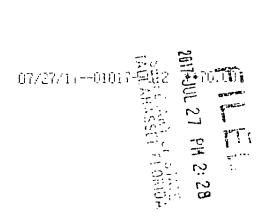
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900301748429



J. HARRIE

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT:	Family Focus Name of corporation	Travel, Income - must include suffix	3	
Dear Sir or Madam:				
"Certificate of Existence	tion by Foreign Corporation for e," or "Certificate of Good St on corporation to transact busi	anding" and check are sub		
Please return all corresp	condence concerning this mat	ter to the following:		
		Johnson of Person		
F	emily Focus T	ravel, Inc.		
	103 S. Galoli	es Blud:		
	Wheaton, City/State	TL (00189		
<u>@</u>	E-mail address: (10 be use		notification)	
For further information	concerning this matter, please	e call:		
Sarah Joh Name of Perso	at (620 on Area Co	ode Daytime Telep		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration S Division of Co P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	
Enclosed is a check for	the following amount:			
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	C \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, 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. (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. Thirdis 3. 47-3889695 (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. April 23, 2015

(Date of incorporation)

5. (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 1103 S. Gables Blud, Wheaton, IL (00189)
(Principal office address) 20 Davada Square West, Unit 262, Wheaton, IZ (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: 1747 Redman St. 110 Office Address: Hollywood, B., Florida 33020 (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.

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Nove, Address: _ Vice Chairman: None Address: ___ Director: None Director: None **B. OFFICERS** Johnson* Solp officer lowner of corporation. Gobles Blud Wheaton, IL (00189 Vice President: Nove Address: Samo as above NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Cucando Heland 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. Sarah K. Johnson, President
(Typed or printed name and capacity of person signing application)

File Number

7007-067-7



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

FAMILY FOCUS TRAVEL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 22, 2015, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, 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 24TH day of JULY A.D. 2017.

Authentication #: 1720501800 verifiable until 07/24/2018
Authenticate at; http://www.cyberdriveillinois.com

SECRETARY OF STATE

esse White