

F20000005119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

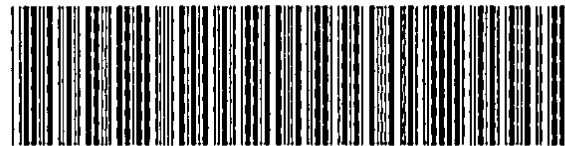
(Document Number)

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20 NOV 16 PM 7:35  
Filing Office

NOV 16

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
Nekia ChemWerks, Inc.

**SUBJECT:** \_\_\_\_\_  
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:  
Daniel W Fowler

_____	Name of Person
Nekia ChemWerks, Inc.	
_____	Firm/Company
1856 Cedar Walk Ln	
_____	Address
Conley, GA 30288	
_____	City/State and Zip code
danf@nekiachemwerks.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel W Fowler	470	471-6116
_____	at (_____)	_____
Name of Person	Area Code	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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

<input type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certificate of Status & Certified Copy
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 14, 2020

DANIEL W FOWLER  
1856 CEDAR WALK LN  
CONLEY, GA 30288

SUBJECT: NEKIA CHEM WERKS, INC.  
Ref. Number: W20000037244

We have received your document for NEKIA CHEM WERKS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 520A00007903

**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.

Nekia ChemWerks, Inc.

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

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  
Georgia 84-5167898

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
05/04/2016 Perpetual

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)  
N/A

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
6900 Tavistock Lake Blvd Suite 400 Orland, FL 32827

7. \_\_\_\_\_  
(Principal office street address)  
1333 Cedar Grove Rd #1153 Conley, GA 30288  
\_\_\_\_\_  
(Current mailing address, if different)

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

Name: Daniel W Fowler  
Office Address: 2121 S Hiawassee Rd Suite 4112  
Orlando 32835  
\_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip code)

20 NOV 16 PM 7:35

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.*

Daniel W. Fowler

(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

☒ Chairman Name: Daniel W Fowler  
6900 Tavistock Lakes Blvd  
☐ Vice Chairman Address: \_\_\_\_\_  
 Suite 400  
☐ Director \_\_\_\_\_  
 Orlando, FL 32827  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: William Jefferies  
6900 Tavistock Lakes Blvd  
☐ Vice Chairman Address: \_\_\_\_\_  
 Suite 400  
☐ Director \_\_\_\_\_  
 Orlando, FL 32827  
☐ President \_\_\_\_\_  
☒ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Richard Blyth  
6900 Tavistock Lakes Blvd  
☐ Vice Chairman Address: \_\_\_\_\_  
 Suite 400  
☐ Director \_\_\_\_\_  
 Orlando, FL 32827  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☒ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Daniel W Fowler  
6900 Tavistock Lakes Blvd  
☐ Vice Chairman Address: \_\_\_\_\_  
 Suite 400  
☐ Director \_\_\_\_\_  
 Orlando, FL 32827  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary \_\_\_\_\_ ☐ Treasurer \_\_\_\_\_  
☐ 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.

12. Daniel W. Fowler  
 Signature of Director or Officer

The officer or director signing this document, and who is listed in number 11, certifies 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.

Daniel W Fowler - CEO  
 13. \_\_\_\_\_  
 (Typed or printed name and capacity of person signing application)

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**Nekia ChemWerks, Inc.**

**a Domestic Profit Corporation**

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 19132686  
Date Inc/Auth/Filed: 05/04/2016  
Jurisdiction : Georgia  
Print Date : 05/12/2020  
Form Number : 211



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State