

Florida Department of State

**F1500000417**

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : REGISTERED AGENTS INC.  
Account Number : I20090000081  
Phone : (307)200-2803  
Fax Number : (813)436-5206

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

**FOREIGN PROFIT/NONPROFIT CORPORATION  
CHEEKY DUCK VINEYARD INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

RECEIVED

2025 JAN 22 PM 1:09

DIVISION OF CORPORATIONS  
TALLAHASSEE

25 JAN 22 PM 4:06

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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. CHEEKY DUCK VINEYARD INC.
(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

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

2. Canada 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/31/2022 5.
(Date of incorporation) (Date of duration, if other than 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. 7901 4th St N STE 300 St. Petersburg, FL 33702
(Principal office street address)
7901 4th St N STE 300 St. Petersburg, FL 33702
(Current mailing address, if different)

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

Name: Northwest Registered Agent LLC

Office Address: 7901 4TH ST N STE 300
ST. PETERSBURG, Florida 33702
(City) (Zip code)

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DIVISION OF CORPORATIONS
25 JAN 27 PM 4:06

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.

Taylor Newman
(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]:

**A. DIRECTORS**

Chairman Name: Keepfer, Josh

Vice Chairman Address: \_\_\_\_\_

Director 7901 4th St N STE 300

President St. Petersburg, FL 33702

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Keepfer, Chasley

Vice Chairman Address: \_\_\_\_\_

Director 7901 4th St N STE 300

President St. Petersburg, FL 33702

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

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

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

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. Joshua Keepfer  
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.

13. Joshua Keepfer, director  
(Typed or printed name and capacity of person signing application)

Transaction Number / Numéro de transaction: APP-A10681010956  
Generated on: January 21, 2025, 08:57 / Généré le: 21 janvier 2025, 08:57



Ministry of Public and  
Business Service Delivery  
Ministère des Services au public et  
aux entreprises

# Certificate of Status

# Attestation du statut juridique

Business Corporations Act

Loi sur les sociétés par actions

This is to certify that

La présente vise à attester que

**CHEEKY DUCK VINEYARD INC.**

Corporation Name / Dénomination sociale

**1000351960**

Ontario Corporation Number / Numéro de société de l'Ontario

is a corporation incorporated, amalgamated or continued under the laws of the Province of Ontario according to the electronic records maintained by the Ministry of Public and Business Service Delivery.

est, selon les dossiers électroniques du dossier du ministère des Services au public et aux entreprises, une société constituée, issue d'une fusion ou qui continue d'être exploitée en vertu des lois de la province de l'Ontario.

The corporation came into existence on October 31, 2022 and has not been dissolved.

La société a vu le jour le 31 octobre 2022 et n'a pas été dissoute.

Director / Directeur

Business Corporations Act / Loi sur les sociétés par actions

Certified a true copy of the record of the Ministry of Public and Business Service Delivery.

Director/Registrar



Copie certifiée conforme du dossier du ministère des Services au public et aux entreprises.

Directeur ou registrateur