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COVER LETTER

_	tion Section of Corporations				
SUBJECT: SI	oortsinsurance.com I	nc.			
			tion - mus	t include suffix	
Dear Sir or Mad	am:				
"Certificate of E	xistence," or "Cert	ificate of Good	Standing"	and check are subm	
Please return all	correspondence co	ations ee.com Inc. Name of corporation - must include suffix by Foreign Corporation for Authorization to Transact Business in Florida, " or "Certificate of Good Standing" and check are submitted to register the opporation to transact business in Florida. dence concerning this matter to the following: Name of Person Firm/Company Address E 1H7 City/State and Zip code E-mail address: (to be used for future annual report notification) accerning this matter, please call: at (514 Area Code Area Code MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 following amount: 1 \$78.75 Filing Fee & \$\$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status			
Alain Houle					
		Name	of Person	1	
Alain Houle Attor	ney				
		Firm/0	Company		
500-3 Place du Co	ommerce				
		A	ddress		
Verdun, Québec,	Canada, H3E 1H7				
		City/Sta	te and Zip	code	
alainb.houle@gm	ail.com				
	E-mail a	iddress: (to be us	ed for fut	ure annual report no	tification)
For further infor	mation concerning	this matter, plea	se call:		
Alain Houle	cn.		<i>'</i>		
Name o	f Person	Area (oae	Daytime Telepho	one Number
Registra Division Clifton I 2661 Ex	T/COURIER ADI tion Section of Corporations Building ecutive Center Cir see, FL 32301			Registration Sec Division of Corp P.O. Box 6327	ction porations
Enclosed is a ch	eck for the following	ng amount:			
☐ \$70.00 Filing				-	

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.	Sportsinsurance.	com Inc.						
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")							
	(If name unavaila	ble in Florida, enter alternate corporate name ad	opted for the purpose of tran	sacting business in Florida)				
2.	Delaware	3.						
	Obligation (State or country under the law of which it is incorporated)		(FEI number	(FEI number, if applicable)				
4.	10/19/1999	of incorporation) 5.						
	(Date of incorporation)		(Date of duration, if	(Date of duration, if other than perpetual)				
6.								
		(Date first transacted business in F						
		(SEE SECTIONS 607.1501 & 607.1502	z, r.s., to determine penalty	naomty)				
7.	20 Broadway, Sar	anac, NY, 12983 United States						
		(Principal	office address)					
	507-1 Place du Co	ommerce. Verdun . Ouebec. Canada. H3E 1A2						
		(Current mailing	address, if different)					
8.	Name and stree	t address of Florida registered agent: (P.O.	Box NOT acceptable)	2016 FEB 16 A II: 37 ECRETARY OF STATE TO AHASSEE, FLORID				
	Name:	InCorp Services, Inc.						
0	ffice Address:	17888 67th Court North		ee. F				
		Loxahatchee	, Florida <u>33470</u>	STA.				
		(City)	(Zip code)	DE 3				

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.

Phease see ATTACHED REGISTERDO AGENT CONSENT FORM (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.



3773 Howard Hughes Pkwy. South Tower, Ste 500 Las Vegas, NV 89169

Phone 702.866.2500 Toll-Free 800.2.INCORP (1-800-246-2677) Fax 702.866.2689

www.incorp.com

February 9, 2016

Corporations Division

Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To Whom It May Concern:

Incorp Services, Inc., an authorized Corporate Registered Agent in Florida, whose office is located at 17888 67th Court North, Loxahatchee, FL 33470, herein consents to act as Registered Agent for **Sportsinsurance.com Inc.** for purposes and services only related to the Florida Department of State.

If you have any questions, please contact me at (800) 246-2677 from 8:00 a.m. to 5:00 p.m. PST.

Sincerely,

INCORP SERVICES, INC.

Jackie DeFilippis, Processor on behalf of Incorp Services, Inc.

2016 FEB 16 A II: 38

Chairman:				
Address:				
	*****			***
Vice Chairman:				
Address:				
Director: Mark Di Perno				
Address: 3248 NE 28th Avenue				
Lighthouse Point, FL, 33064				
Director:				
Address:		36	1 23	
		P 10		
B. OFFICERS		SE	63	Non-controller
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2010 NT 2011		ALS H		U
Address: 3248 NE 28th Avenue				
Lighthouse Point, FL, 33064				
Vice President:				
Address:				
	1.40			
Secretary:				
Address:				· · · · · · · · · · · · · · · · · · ·
Freasurer:				_
Address:				
NOTE: If necessary, you may artach an addendum to the applicati	on listing additional offi	cers an	d/or dir	ectors.
12.				
Signature of Director or Control of Signature of Signature of Director or Control of Signature of Sig			_	

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SPORTSINSURANCE.COM INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF FEBRUARY, A.D. 2016.

Authentication: 201767979

Date: 02-02-16

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SR# 20160540647