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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : UNITED CORPORATE SERVICES, INC.

Account Number : I20140000108

: (914)949-9188

Phone Fax Number

: (914)949~9618

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

Registeredagent@unitedcorporate.com Email Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION ZETTAFOX INC.

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(((H16000243816 3)))

## 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. ZICTI AFOX INC

, 221,141,571,11	orporation; must include "INCORPORATED,	والمراب والمراب المراب والمرابع والمراب	
(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED; prp," "Inc." "Co," or "Corp,")	" "COMPANY," "CORPOBATION,"	
(If name unavail	able in Florida, enter alternate carporate name	adopted for the purpose of transacting business in Flo	orida)
Delaware	7	81-3628950	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
August 10, 2014	6	Downson	
(Date	of inverporation)	(Date of duration, if other then perpetual)	<del></del>
A & A total visit با الله الله الله الله الله الله الله ا	(Date that transacted business in	n Florida, if prior to registration)	and of the second
	(SEE SECTIONS 607.1501 & 607.15	502, F.S., to determine penalty liability)	
	es, 100 North Biscayne Boulovard, Suite 500,	and the state of t	
	(Princi)	oul office uddrass)	
	engalana isk maari dhe e said kan anabia i min kii kan anjaganiy da aladii kiik inga ahishii 	ng address, if different)	gas que en quel sel s
	(४-४४४ स्टब्स् १४४४) ।।।	ill address, it differently	
Name and street	t <u>address</u> of Florida registered agent: (P.C	) Hoy NOT accentable)	95
14mile and Wiles	United Corporate Services, Inc.	1, 1900 Just accoptance	
Name	A file of protein the protein and the protein	man Federa Para and	ည်း
fice Address:	9200 South Dadeland Blvd. Suite 508		(
	Miami	33156	i i
	(City)	Florida(Zip code)	ှင့
	(City)	(sup some)	မော်

9. Registered agent's acceptance:

Having been named us 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.

Michael A Barrifle's (Registored 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.

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

	ECTORS  Leon Patrick Zerbib		
Chairman Address:	c/o Jade Associates, 100 North Biscayne Boulevard, Suite 500, Miami, Florida 33132		
	Marc Joseph Atelinh rman: e/o Inde Associates, 100 North Biscayne Boulevard, Suite 500, Miami, Florida 33132		
Director: Address:	Luis Arturo Belmar Letelier c/o Jade Associates, 100 North Biscayne Boulevard, Suite 500, Minmi, Florida 33132		
			<del></del>
B. OFFI	CERS Leon Patrick Zerbib	<del></del>	
Address:	e/o Jado Associates, 100 North Biscayne Boulevard, Suite 500, Miami, Florida 33132	16 SE	
Vice Presi	Luis Anuro Belmar Letelier	<u></u> မှ	
Address:	c/o Jade Associates, 100 North Bisenyne Boulevard, Suite 500, Miami, Florida 33132	÷	तं-< शुक्
Secretary:	Herve Linder	9: 03	9.0 3.0 5.0 5.0 5.0 5.0 5.0 5.0 5.0 5.0 5.0 5
Address: _	c/o Ernst & Linder LLC, 17 Battery Place, Suite 1307, New York, NY 10004  Marc Joseph Atuliah	<del> </del>	
	c/o Jude Associatos, 100 North Biscayne Boulevard, Suite 500, Miami, Fforida 33132		
NOTE: I	If necessary, you may attach an addendum to the application listing additional officers and/or direc		
are true as a third de	Signature of Director or Officer or director signing this document (and who is listed in number 11 above) affirms that the facts so and that he or she is aware that false information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S. a Linder, Secretary  (Typed or printed name and capacity of person signing application)		

(((H16000243816 3)))



Page 1

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

DELAWARE, DO HEREBY CERTIFY "ZETTAFOX 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 NINETEENTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZETTAFOX INC."
WAS INCORPORATED ON THE NINETEENTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

6128410 8300 SR# 20165441960

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202858353

Date: 08-19-16