Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

....

Account Number : 120000000045

Phone : (302) 645-7400

Fax Number : (302)645-1280

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

Email Address: antoine@stargazer.co

FOREIGN PROFIT/NONPROFIT CORPORATION

Stargazer, Inc.

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June 1, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

HARVARD BUSINESS SERVICES, INC.

SUBJECT: STARGAZER, INC.

REF: W17000046190

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp." "Inc.," "Co.," "Corp." The space provided in number one of the application.

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

Dionne M Pijeaux Regulatory Specialist Registration Section FAX Aud. #: H17000146259 Letter Number: 917A00010960

under the law of which it is incorporated.

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 teame of corporation; must include "INCORPORATED." "COMPANY." "CORPORATION." " lnd.," "Co.," "Corp," "lnd," "Co," or "Corp "): Storgazer Influencer, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (FEI number (fapplicable) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty hability) 1010 NE 2nd Ave., Miami, FL 33132 (Principal office address) (Curem mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Antoine Forest Nane: 1010 NE 2nd Ave. Office Address: Miami 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. Thereby accept the appointment as registered agent and agree to act in this capacity. Ifurther 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. (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

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Director	Antoine Forest	
	1010 ne 2nd ave Miami FL 33132 🤫	
Director	Daniel Zumino	
Address	1010 ne 2nd ave Miami FL 33132	
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B. OFF		Få 5
President	Antoine Forest	AND AND AND A
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Vice Pres	Alam Revah ident:	RA C
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Treasurer Address	1010 NE. 2nd Ave., Miarw. FL. 33132	r y 190 20000 2000 y angus (are a saures y 200 20000 P Piller y 201 20000 r vin 60000 (200 P Piller 2000) any r
	If necessary, you may attach an addendum to the application listing additional offi	
1 %	Simple Francisco CSE	
Theoffic	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirm	e that the facts stated horsen
	nd that he or she is aware that false information submitted in a document to the De	is migration races stated free exit
	gree felony as provided for in s.817.155, F.S.	open master of the stable to stable the total
	ine Forest, President	
·	(Typed or printed name and capacity of person signing application))



Page 1

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

DELAWARE, DO HEREBY CERTIFY "STARGAZER, 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 THIRTY-FIRST DAY OF MAY, A.D. 2017.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STARGAZER, INC."
WAS INCORPORATED ON THE FOURTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THATS THE FRANCHISE TAKES HAVE BEEN PAID TO DATE.

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SR# 20174337933

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

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Authentication: 202623818

Date: 05-31-17