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(((H18000027363 3)))



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FOREIGN PROFIT/NONPROFIT CORPORATION

Lexine, Inc

| Certificate of Status | |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
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H180000273433

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.

| Lexine, Inc (Enter name of co | aporation; must include "INCORPORATED orp," "Inc." "Co," or "Com") | ." "COMPANY," "CORPORATION," | |
|--|---|---|-----------------|
| (If name unavaila | ble in Florida, enter alternate corporate name | e adopted for the purpose of transacting business in Flori | da) |
| 2. Texas | ander the law of which it is inconversed. | 46-2745654 | |
| | under the law of which it is incorporated) | (FEI mumber, if applicable) | |
| 4. 5/8/2013 | 5 | Perpetual | |
| (Date) | of incorporation) | (Date of direction, if other than perpetual) | |
| 6. Upon Qualific | ation | | |
| | | in Florida, if prior to registration) 1502, F.S., to determine penalty liability) | |
| 7. 322 N 3rd St, N | Icallen, Texas 78501 | | |
| | (Pinic | ipal office address) | 18 JAN 23 |
| | (Current mail | ing address, if different) | 23 |
| 8. Name and street | t address of Florida registered agent: (P | .O. Box NOT acceptable) | MH 10: 57 |
| Namet | Business Filings Incorporated | | יי ריי זי דט |
| Office Address: | 1200 South Pine Island Road | | 2 |
| | Plantation | Florida 33324 | |
| | (City) | . Florida 33324 (Zip code) | |
| designated in this further agree to co | ed as registered agent and to accept ser application. I hereby accept the appoin | vice of process for the above stated corporation a timent as registered agent and agree to act in this relative to the proper and complete performance of my position as registered agent. | capacity. 1 |
| | Nattl Mark Williams, AV | P, Business Filings incorporated | |
| | (Registere | d 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 Sectetary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

| 11. Name | es and business addresses of officers and/or directors: |
|-----------------------------|---|
| A. DIRE | CTORS |
| Chainman: | ^ |
| Address: . | |
| Vice Chair | man: |
| Address: _ | |
| Director: | Frank Martinez |
| Address: _ | 322 N 3rd St, Mcallen, Texas 78501 |
| Director: , | Gabriel Zuniga |
| Address: | 521 N 10th St, Donna, Texas 78537 |
| B. OFFI President: Address: | Prank Martinez 322 N 3rd St, Merlien, Texas 78501 |
| Vice Possi | dent: Ciabriel Zuniga |
| Address: _ | 521 N 10th St. Donus, Texas 78537 |
| Secretary: | Frank Maitinez |
| Address: _ | 322 N 3rd St, Mcallen, Texas 78501 |
| Treastnět: | Frank Martinez |
| Address: _ | 322 N 3rd St, Moallen, Texas 78501 |
| NOTE: 1 | If necessary, yet may tach ar addendum to the application listing additional officers and/or directors. |
| are true at | Signature of Director of Officer or Officer or Officer or of director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes up the felony as provided for in \$.817.155, F.S. |
| 13. <u>Fra</u> | ink Martinez, President |
| | (Typed or printed name and capacity of person signing application) |

Corporations Section P.O.Box 13697 Austin, Toxas 78711-3697



Rolando B. Pablos Secretary of State

Office of the Secretary of State

Certificate of Fact

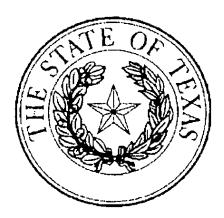
The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for LEXINE, INC (file number 801781029), a Domestic For-Profit Corporation, was filed in this office on May 08, 2013.

It is further certified that the entity status in Texas is in existence.

DIVISION OF COSPORATIONS

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 18, 2018.

ıi.





Rolando B. Pablos Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB Come visit us on the Internet at http://www.stat.ata.tx.us/ Fax: (512) 463-5709 TID: 10264

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