5/27/2020



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

**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

Perlino GP Limited Company

Certificate of Status	1
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Page Count	04
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Help

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.

	prporation; must include "INCORPORATED,"	"COMPANY," "CORPORATION,"
"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")	
(If name unavaila	ble in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florida)
Cayman Islands	3	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
05/19/2020	S	(Date of duration, if other than perpetual)
(Date	of incorporation)	(Date of duration, if other than perpetual)
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	
21 South Church	Street, Grand Cayman, KY I-1104, Coyman Isla	
	(Principal office	street address)
PO Box 309, Ugl	and House, Grand Cayman, KY1-1104, Cayman	Islands .020
	(Current mailing	address, if different)
		Islands 223 address, if different) 22 Pox NOT acceptable) 27
Name and stree	t address of Florida registered agent: (P.O.	Box MOT acceptable)
Name:	Corporate Creations Network Inc.	
fice Address:	801 US Highway I	· <i>r</i> :
mee Address.	North Palm Beach	
	(City)	, Florida(Zip code)
		•
iving been nam signated in this other agree to co	application, I hereby accept the appointme	of process for the above stated corporation at the place int as registered agent and agree to act in this capacity. ative to the proper and complete performance of my du- tion as registered agent.
-		

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.

Sean Arno, Special Secretary

(Registered agent's signature)

^{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:	□ Chairman	Name: Daniel Wanek		
□Vice Chairman	Address: PO Box 309, Ugland House	□Vice Chairman	Address: PO Box 309, Ugland House		
Director	Grand Cayman, KY1-1104, Cayman Island:	Director	Grand Cayman, KY1-1104, Cayman Islanc		
□President		□President			
□Vice President		☐Vice President			
Socretary	□Treasurer	Secretary	☐ Treasurer		
□Other	Other	Other	Other		
□ Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	PO Box 309, Ugland House	□Vice Chairman	Address:		
Director	Grand Cayman, KY1-1104, Cayman Isla	Director			
☐President		□President			
□Vice President		□Vice President	***************************************		
☐ Secretary	□Treasurer	☐ Secretary	☐ Treasurer		
□Other	□ Other	Other			
			2020 F.		
□Chairman ·	Name:	☐ Chairman	Name:		
☐Vice Chairman	Address:	□Vice Chairman	Address: 2		
Director		Director	-0		
□President		President	<u> </u>		
□Vice President		□Vice President	8		
☐ Secretary	☐Treasurer	Secretary	☐ Treasurer		
Other	Other	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 forida Department of State Annual Report form.					
· • · · · · · · · · · · · · · · · · · ·	Signature of Director of	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.					

(Typed or printed name and capacity of person signing application)

Certificate Of Good Standing

TO WHOMIT-MAY CONCERN

I DO HEREBY CERTIFY that

mited

to exercise therein all the powers vested in Given under my hand and Seal at George Town in the Island of Grand Cayman this 26th day of May

Two Thousand Twenty

a company duly organised and existing uni

the Laws of The Cayman

fice, and duly authorised

Islands is at the date of this certificate in

Registry of Companies. An Authorised Officer,

Cayman Islands.

Authorisation Code : 967299574962 www.verify.gov.ky 26 May 2020

REGISTRES EXEMPTED