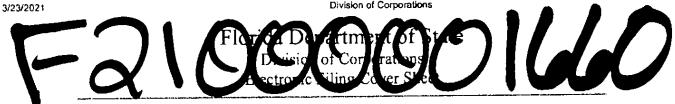
From: James Tanks III

Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 : (614)280-3338 Phone : (954)208-0845 Fax Number

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

Email Address:	
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FOREIGN PROFIT/NONPROFIT CORPORATION

Darkstore, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu



Peae: 3 of 5

From: James Tanks III

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

Darkstore, Inc.	The state of the s			
 (Enter name of co 	orporation; must include "INCORPORATED," ' orp," "Inc." "Co," or "Corp.")	COMPANY, "CORPORATION.		
(If name unavaila	ble in Florida, enter alternate corporate name ad	opted for the purpose of transacting bus	iness in Florida)	
Delaware	3.			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applical	hle) 👝	
10/05/2015 4.	of incorporation) 5.		2021	
(Date	of incorporation)	(Date of duration, if other than	perpetual)	
N/A 6			<u> </u>	1
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 2, F.S., to determine penalty liability)		
3490 NW 2nd Av	enue, 2nd Floor, Miami, FL 33127		PK C	المعين "
/	(Principa	office address)		
3490 NW 2nd A	venue, 2nd Floor, Miami, FL 33127		, ,	
		· ————————————————————————————————————		
	(Current mailing	address, if different)		
8. Name and <u>stre</u> g	(Current mailing of address of Florida registered agent: (P.O. C T Corporation System			
Name:	et address of Florida registered agent: (P.O. C T Corporation System			
	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road	Box NOT acceptable)		
Name:	et address of Florida registered agent: (P.O. C T Corporation System	Box NOT acceptable)		
Name: Office Address: 9. Registered ag Having been nan designated in this further agree to 6	et address of Florida registered agent: (P.O. C T Corporation System 1200 South Pine Island Road Plantation,	Box NOT acceptable) , Florida	o aci in inis capi	icny.
Name: Office Address: 9. Registered ag Having been nan designated in this further agree to d duties, and I am	C T Corporation System 1200 South Pine Island Road Plantation, (City) ent's acceptance: aed as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes re	Box NOT acceptable) 33324 , Florida (Zip code) e of process for the above stated coent as registered agent and agree to lative to the proper and complete p my position as registered agent.	o aci in inis capi	icny.

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.

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

A. DIRECTORS

Chairman:	l.ee Hnetinka	
Address:	7/o Darkstore, Inc., 3490 NW 2nd Avenue, 2nd Floor, Miami, FL 33127	
		
Vice Chai	Tim Conners V	
Address:	Jo Darkstore, Inc., 3490 NW 2nd Avenue, 2nd Floor, Miami, FL 33127	
Director:	Gary Fritz. 🗸	
	c/o Darkstore, Inc., 3490 NW 2nd Avenue, 2nd Floor, Miami, FL 33127	- -
Director:	Laura Yao V)
	c/o Darkstore, Inc., 3490 NW 2nd Avenue, 2nd Floor, Miami, FL 33127	<u> </u>
B. OFF	CERS Lee Hnetinka	
	e/o Darkstore, Inc., 3490 NW 2nd Avenue, 2nd Floer, Miami, FL 33127	
	dent:	
Secretary	Lee Hnetinka 🗸	
•	e/o Darkstore, Inc., 3490 NW 2nd Avenue, 2nd Floor, Miami, FL 33127	
Address: Treasure	Lee Hnetinka	
Address:	c/o Darkstore, Inc., 3490 NW 2nd Avenue, 2nd Floor, Miami, FL 33127	
	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
12	. Hudinka Signature of Director or Officer	
are true a third o	ter or director signing this document (and who is listed in number 11 above) aftirms that the facts stated here and that he or she is aware that false information submitted in a document to the Department of State constituegree felony as provided for in s.817.155, F.S.	in ites
13. Lec	Inetinka, President (Typed or printed name and capacity of person signing application)	
	/1 Abort or british units and enhanced or berson arguing approach	

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "DARKSTORE, 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 TWENTY-THIRD DAY OF MARCH, A.D. 2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE-

5842311 8300

SR# 20211013968

Authentication: 202803564

Date: 03-23-21

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