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Florida Department of State
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Fax Number : (850)617-6383

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

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

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**FOREIGN PROFIT/NONPROFIT CORPORATION
CREATIVE WAVES FOUNDATION**

Certificate of Status	0
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February 15, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CSC

SUBJECT: CREATIVE WAVES FOUNDATION
REF: W21000020266

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 designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. These names are not available for one year from the date of administrative dissolution/revocation unless such entity provides the Department of State with an affidavit or letter releasing the name for use and affirming that they have no intention of reinstating.

An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate name must contain "CORPORATION", "CORP.", "INCORPORATED", or "INC.". Section 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a not-for-profit corporation. Please enter the alternate name in the space provided in number one of the application.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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

Mel Solomon
Senior Section Administrator

FAX Aud. #: H21000061226
Letter Number: 721A00003328

CREATIVE WAVES FOUNDATION, INC.
9255 SUNSET BOULEVARD
2nd FLOOR
WEST HOLLYWOOD, CA 90069

April 19, 2021

To: Florida Division of Corporations


Re: Use of Name Creative Waves Foundation

Dear Sir or Madam:

This letter is to notify you that Creative Waves Foundation, Inc., a Florida not for profit corporation (file no. N19000012769) that was administratively dissolved on September 25, 2020, hereby releases the name "Creative Waves Foundation, Inc." for use. Creative Waves Foundation, Inc., does not intend to reinstate in Florida.

Very truly yours,

Creative Waves Foundation, Inc.,
a Florida not for profit corporation

By: 
Candace Tamposi
Director

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APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Creative Waves Foundation, Inc

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California 3. 85-1557804
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 15, 2020 5.
(Date of Incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 235 Park Avenue South - 9th Floor, New York, New York 10003
(Principal office street address)

c/o Phil Sarna, PS Business Management, LLC, 235 Park Avenue South - 9th Floor, New York, New York 10003
(Current mailing address, if different)

8. The Corporation is organized for charitable and educational purposes.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32031
(City) (Zip Code)

10. 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, 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.

Corporation Service Company

By: [Signature]
(Registered agent's signature)

11. 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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12. 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: Alexandra Tamposi
 Vice Chairman Address: 235 Park Ave. South - 9th Fl
New York, NY 10003
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other: _____ Other: _____

Chairman Name: Candace Tamposi
 Vice Chairman Address: 235 Park Ave. South - 9th Fl
New York, NY 10003
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other: _____ Other: _____

Chairman Name: Phil Sarna
 Vice Chairman Address: 235 Park Ave. South - 9th Fl
New York, NY 10003
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other: _____ Other: _____

Chairman Name: Jamie Hindlin
 Vice Chairman Address: 235 Park Ave. South - 9th Fl
New York, NY 10003
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other: _____ Other: _____

Chairman Name: Layla Paris
 Vice Chairman Address: 235 Park Ave. South - 9th Fl
New York, NY 10003
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other: _____ Other: _____

Chairman Name: Roman Campolo
 Vice Chairman Address: 235 Park Avenue South - 9th Floor,
New York, NY 10003
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other: _____ Other: _____

NOTE: 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 Florida Department of State Annual Report form.

13. Candace Tamposi
(Signature of Chairman, Vice Chairman or any officer listed in number 12 of the application)

14. Candace Tamposi, Secretary
(Typed or printed name and capacity of person signing application)



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ATTACHMENT TO APPLICATION BY FOREIGN NOT FOR PROFIT
CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS
IN FLORIDA

Item 12 (continued)

Andrew Watt
Director
235 Park Ave. South -- 9th Floor
New York, NY 10003



Secretary of State Certificate of Status

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I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: CREATIVE WAVES FOUNDATION
File Number: C4614107
Registration Date: 07/15/2020
Entity Type: DOMESTIC NONPROFIT CORPORATION
Jurisdiction: CALIFORNIA
Status: ACTIVE (GOOD STANDING)

As of February 11, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 12, 2021.

Handwritten signature of Shirley N. Weber, Ph.D.

SHIRLEY N. WEBER, Ph.D.
Secretary of State

Certificate Verification Number: Y6GN9KZ

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at <https://file.sos.ca.gov/certifications/index>.

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