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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

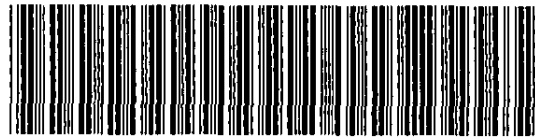
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
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14 APR -2 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 4/3



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 079216 7665949

AUTHORIZATION :

COST LIMIT :

\$ 70.00

ORDER DATE : April 1, 2014

ORDER TIME : 4:28 PM

ORDER NO. : 079216-005

CUSTOMER NO: 7665949

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14 APR -2 AM 8:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: PSYTECH DIGITAL US INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

**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.*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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1. PSYTECH DIGITAL US INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. DELAWARE

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. MARCH 10, 2014

(Date of incorporation)

5. \_\_\_\_\_

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8201 PETERS ROAD, PLANTATION, FL 33324

(Principal office address)

8201 PETERS ROAD, PLANTATION, FL 33324

(Current mailing address)

8. ENTERTAINMENT SERVICES (PSYCHIC CONSULTATIONS, DATING)

(Purpose(s) of corporation authorized in home state or country to be carried out in 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

(City)

Florida 32301

(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: Sue G. Knight

(Registered agent's signature)

**Sue G. Knight**  
**Assistant Vice President**

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.

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: RICHARD BRENNAN

Address: 8201 PETERS ROAD, PLANTATION, FL 33324

Director: MARCUS BRENNAN

Address: 8201 PETERS ROAD, PLANTATION, FL 33324

**B. OFFICERS**

President: RICHARD BRENNAN

Address: 8201 PETERS ROAD, PLANTATION, FL 33324

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: MARCUS BRENNAN

Address: 8201 PETERS ROAD, PLANTATION, FL 33324

Treasurer: MARCUS BRENNAN

Address: 8201 PETERS ROAD, PLANTATION, FL 33324

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Richard Brennan

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. RICHARD BRENNAN, PRESIDENT

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

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SECRETARY OF STATE  
PALM BEACH, FLORIDA

# Delaware

*The First State*

PAGE

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14 APR -2 AM 8:25  
SECRETARY OF STATE  
WILLIAM H. HASSER, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PSYTECH DIGITAL US 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 FIRST DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PSYTECH DIGITAL US INC." WAS INCORPORATED ON THE TENTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5495552 8300

140414423

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1258222

DATE: 04-01-14