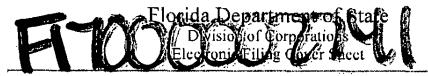
6/15/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001605903)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 Phone

Fax Number : (954)208-0845

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

Email	Address:			<u>-</u>		
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FOREIGN PROFIT/NONPROFIT CORPORATION

Pheronym, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

D. SCOTT

JUN 1 6 2017

COVER LETTER

	tration Section of Corp				
SUBJECT:	Pheronym,				
SCBGECT.		Name o	f corporation	- must include suffix	
Dear Sir or M	adam:				
"Certificate of	f Existence		of Good Stan	Authorization to Transac ding" and check are sub ss in Florida.	
Please return	all correspo	ndence concernit	ng this matter	to the following:	
Karl Cameron	Schiller				
			Name of I	Person	-1.7
Pheronym, Inc				*#	2
			Firm/Com	pany	<u> </u>
	747 5	SW 2ND AVE ST	TE 347 IMB8		5
			Addre	SS	\
	(GAINESVILLE,	FL 32601		
		schiller@	City/State a	•	25
		-	- •	or future annual report r	notification)
For further in	formation c	oncerning this m	atter, please c	all:	
Karl Cameron	Schiller		at (352	219-4464	
Name	e of Person		Area Code	Daytime Telepl	none Number
Regis Divisi Clifto 2661	tration Sec ion of Corp on Building	orations Center Círcle	S:	MAILING Al Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
Enclosed is a	check for t	he following amo	unı:		
■ \$70.00 Fil	ing Fec	\$78,75 Filing Certificate o		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

Pheronym, Inc.							
(Enter name of c	corporation; must include "INCORPORATED," 'corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION	1,:				
		r2					
(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transactin	g business in Florida)				
Dolaware	3						
(State or countr	ry under the law of which it is incorporated)	(FEI number, if ap	plicable)				
03/08/2017							
	of incorporation)	(Date of duration, if other	than perpetual)				
Ś.	April 21, 2017						
·	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	lorida, if prior to registration) 2, F.S., to determine penalty liabili	ıy)				
7	747 SW 2ND AVE STE 347 IMB8						
•	(Principal	office address)	<u> </u>				
	GAINESVILLE, FL 32601						
	(Current mailing	address, if different)					
			- 18 를 끌				
3. Name and street	et address of Florida registered agent: (P.O.	Box NOT acceptable)	55 m				
Name:	C T Corporation System		三三 宣				
	1200 South Pine Island Road	.	5				
Office Address:	1200 Dodd File foliate feat		# 2				
	Plantation	, Florida	; » ¹				
	(City)	(Zip code)					
} Registered ag	ent's acceptance:						
	ted as registered agent and to accept service	of process for the above state	d corporation at the place				
	application, I hereby accept the appointment						
	omply with the provisions of all statutes rel familiar with and accept the obligations of i						
,	C T Corporation Sys						
Ву:	Janifar Vinces (Registered ag	ut					
	(Registered ag	ent'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 Secretary 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 offi	cers and/or directors:			
A. DIRE	CTORS				
Chairman:					
Vice Chair	man:				
Director:					
Address: _					
Director:	,		G&		
Address: _					
B. OFFI	CERS				
President:	Fauna Kaplan				
	747 SW 2ND AVE STE 347 IMB8				Sandy -
	GAINESVILLE, FL 32601				
Vice Presid	dent:				
				4	2 -
					至し
Secretary:					<u> </u>
Address:				.	
Treasurer:					
Address: _					
NOTE: I	f necessary, you may attach an a	addendum to the applic	ation listing addit	ional officers and/or d	lirectors.
12	Fatma Kapla	n			
The office are true ar a third dep	er or director signing this documend that he or she is aware that fagree felony as provided for in s.	Signature of Directo ent (and who is listed i lse information submit 317.155, F.S.	n number 11 abov	c) affirms that the fac	
13	Fatma Kaplan	President			

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

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "PHERONYM, 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 FIFTEENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES
HAVE BEEN ASSESSED TO DATE.

6349162 8300

SR# 20174771540

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

Justiney W. Mullaca, Specietary of State

Authentication: 202715165

Date: 06-15-17