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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
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.\*\*

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FLORIDA PROFIT/NON PROFIT CORPORATION  
Toy Network, Inc.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 1       |
| Certified Copy        | 1       |
| Page Count            | 03      |
| Estimated Charge      | \$87.50 |

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D O'KEEFE  
FEB 15 2018

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**The name of the corporation shall be: Toy Network, Inc.**ARTICLE II PRINCIPAL OFFICE**Principal street address701 S. Olive Ave. #1712

Mailing address, if different is:

West Palm Beach, FL 33401**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

to engage in the business of selling products at retail and other lawful purposes**ARTICLE IV SHARES**The number of shares of stock is: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Bogdan NowakName and Title: President, Treasurer & SecretaryAddress: 701 S. Olive Ave. #1712

Address:

West Palm Beach, FL 33401

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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|                 |       |                 |       |
|-----------------|-------|-----------------|-------|
| Name and Title: | _____ | Name and Title: | _____ |
| Address:        | _____ | Address:        | _____ |
|                 | _____ |                 | _____ |
|                 | _____ |                 | _____ |

**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: CT Corporation System

Address: 1200 South Pine Island Road

Plantation, FL 33324

**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:

Name: James P. Redding, Esq.

Address: Greenberg Traurig, LLP, One International F

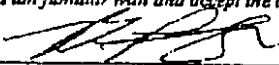
Boston, MA 02110

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

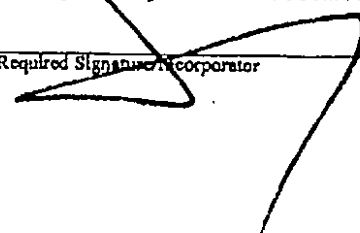
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
 \_\_\_\_\_  
 Brian Smith, Assistant Secretary  
 Required Signature/Registered Agent

2/14/2018

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.153, F.S.*

  
 \_\_\_\_\_  
 Required Signature/Incorporator

14 Feb 18  
 \_\_\_\_\_  
 Date

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 TALLAHASSEE, FLORIDA

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