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(R	equestor's Name)
Α)	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(B	lusiness Entity Name)
(C	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	02/11/2020		
	Merritt Walker		
Reference #	1184273		
	:	PCMA, INC.	
✓ Article		ration to Transact Business	2020 FEB 11 SECNETARY TALLAHASSE
Change of Agent Reinstatement Reinstatement			P# (P. F. C. F.
Reins	tatement		PH 4: 47
Conve	ersion		P
☐ Merge	er		
☐ Dissol	lution/Withdrawal		
☐ Fictition	ous Name		
Other	- -		
Authorized A	mount: \$70		
Signature:			

F: 800.944.6607

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.

1.		PUMA,	inc.		
		rporation; must include "INCORPORATED," rrp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"		
	(If name unavailal	ble in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida)		
2.		California 3.	51-0654034		
	(State or country	California 3. under the law of which it is incorporated)	(FEI number, if applicable)		
4.		09/24/2007 5.	Damahad		
	(Date o	of incorporation)	(Date of duration, if other than perpetual)		
6. Upon Qualification		fication Example 20	-		
-		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)	: ; =	
7.		65 Enterprise, Suite #360, Alis	o Viejo, California 92656	T	
٠٠,	(Principal office address)				
			LORI STAIL		
		(Current mailing	g address, if different)		
8.	Name and street	address of Florida registered agent: (P.O	. Box NOT acceptable)		
	Name:	COGENCY GLOBAL INC.			
Oi	Micc Address:	115 North Calhoun Street, Suite	4		
		Tallahassee	, Florida <u>32301</u>		
		(City)	(Zip code)		
He de fu	signated in this of other agree to co	ed as registered agent and to accept service upplication, I hereby accept the appointm	ce of process for the above stated corporation at the place tent as registered agent and agree to act in this capacity clative to the proper and complete performance of my my position as registered agent.		

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.

(Registered agent's signature)

Ment Walker AST Scrietaril

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

A. DIRECTORS	
Chairman:	John Lynch
Address:	
Address:	
	John Lynch 🗸
Address:	65 Enterprise, Suite #360, Aliso Viejo, California 92656
Director:	Aron Rofer V A 28
Address:	GE Entermine Suite #200 Alice Visia California 02000 75
B. OFFICERS President:	Acces Refer
Address:	Om -1
Vice President:	
Address:	
Secretary:	John Lynch 🗸
\ddress:	65 Enterprise, Suite #360, Aliso Viejo, California 92656
Treasurer:	John Lynch 🗸
Address:	65 Enterprise, Suite #360, Aliso Viejo, California 92656
	may attach ap addendum to the application listing additional officers and/or directors.
12	Signature of Director or Officer
are true and that he or she	Signature of Director or Officer uning this document (and who is listed in number 11 above) affirms that the facts stated herein is aware that false information submitted in a document to the Department of State constitutes rovided for in s.817.155, F.S.
13	Aron Rofer - President
	Typed or printed name and capacity of person signing application)

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

PCMA, INC.

FILE NUMBER:

C3048336

FORMATION DATE:

09/24/2007

TYPE:
JURISDICTION:

DOMESTIC CORPORATION

ON: CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, 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 07, 2020.

ALEX PADILLA Secretary of State