

To: Registration Se	ection		
Division of Co	rporations		-
SUBJECT: Citru	US SuitE PRO DU	CHIONS, TWC.	<u> </u>
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Dear Sir or Madam:			
	ion by Foreign Corporation foe", and check are submitted to		
Please return all corresp	ondence concerning this matt	er to the following:	
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<u>C'i</u>	OSEPH St. AND (Name) RUS Suite Prop	UCTIONS, INC	·
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	1ANDO, F1 3 (City/s	tate/Zip)	TOP R
Should you need to call	someone concerning this mat	ter, please call:	TORRESTATE OF THE STATE OF THE
Joseph St.	ANGELO at (407) 380 -096	8
(Name of Person	on) (Are	a Code & Daytime Telep	F10-0118
STREET ADDRESS:		MAILING ADDRES	SS:
Registration Section Division of Corporation 409 E. Gaines St. Tallahassee, FL 32399	s	Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231	
Enclosed is a check for	he following amount:		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & (Certificate of Status	3 \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee,

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. KRODUCTIONS, INC. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "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.) (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) AND SEIL NOVERS. MI 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 or Mail Drop Box NOT acceptable) Name: Office Address:

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.

(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.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: Address: Director: Address: **B. OFFICERS** NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of CITRUS SUITE PRODUCTIONS, INC. was filed on 04/15/1998, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 20th day of July two thousand.

Special Deputy Secretary of State

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