To:

Registration Section

Division of Corporations

SUBJECT: <u>CYPRUS Global Communications Inc</u>
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARCUS 5+0vail 200003438082-00
(Name of Person) 18/19/00-01081-009
(Name of Person) ******87.50 ******87.50

CYPRUS Global Communications
(Firm/Company)

4350 Nw 30th 5t # 333

(Address)

CoConot Creek, FC 33066
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

MARCUS Sto (Name of Person	on) at (96	59 - Ste 9 Area Code & Daytime Telep	phone Number)
STREET ADDRESS:		MAILING ADDRES	
Registration Section		Registration Section	DA 35
Division of Corporation	S	Division of Corporation	ons
409 E. Gaines St.	-	P.O. Box 6327	
Tallahassee, FL 32399		Tallahassee, FL 3231	4 - 9YUW
Enclosed is a check for t	he following amount:		10/23
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$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.

1. CYPRUS Global Communications 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.)	
2. Deleware 3. 52-2269544 (State or country under the law of which it is incorporated) (FEI number, if applicable)	_
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. 9-21-60 5. Der pet-vol. (Date of incorporation) 5. Der pet-vol. (Duration: Year corp. will cease to exist or "perpetual")	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
6. Oate 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.)	
7. a. 4350 Nw 30th St \$ 333 Coconut Creek, H 3306 (Principal office address)	le
(Principal office address)	
b. 4350 Nw 30th St \$\frac{44}{5}333 Coconut Creek, FC 3300 (Current mailing address)	کو
(Current mailing address)	
8. All hawfull business in the State of Morada	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	
O Name and attract address of Florida maintened amonts (D.O. Day on Mail Draw Boy NOT ansortable)	
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name: Marcus Stouall	_
Office Address: 4350 NW 304 84-#333	
Office Address: 4350 NW 3047 84 4383 Coconut Creak , Florida 33066 RET ST	
(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.

(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 Vice Chairman: SAME Address: __ Director: SAME AS Above Address: Director: _ Address: _ **B. OFFICERS** President: SAME AS Above Address: Vice President: 5AME AS Aboue Address: __ __ __ Secretary: SAME AS Aboue Treasurer: SAME AS Above Address: 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) MARCUS

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

State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CYPRUS GLOBAL COMMUNICATIONS 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 TWENTY-FIFTH DAY

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CYPRUS GLOBAL COMMUNICATIONS INC. WAS INCORPORATED ON THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2000.

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

3291487

OF SEPTEMBER, A.D. 2000.

001482913

DATE: 09-25-00