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| Special Instructions to Filing Officer: | | | | | | |
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TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | | | |
|---|---|--|---------|
| SUBJECT: Kabo Technical Suppor (Name of corpo Dear Sir or Madam: | t Services Inc. oration - must include suffix |) | |
| The enclosed "Application by Foreign C Business in Florida", "Certificate of Exis above referenced foreign corporation to | tence", and check ar | e submitted to regis | ter the |
| Please return all correspondence conce | erning this matter to t | | t_i |
| La (Na | arry Walston ame of Person) al Support Services Inc. Firm/Company) N.W. 50 Street (Address) | | |
| Kabo Technica (F | nc. | 03 OCT 31 PM 1 | |
| | N.W. 50 Street (Address) | | 1: 09 |
| | Florida 33166 City/State/Zip) | | |
| Should you need to call someone conce | erning this matter, ple | ease call: | |
| Larry Walston |)8 | | |
| (Name of Person) | (Area Code & Daytime | e Telephone Number) | |
| COURIER ADDRESS: | MAILING AD | DRESS: | |
| Registration Section Division of Corporations 409 E. Gaines St | Registration Section Division of Corporations P. 0. Box 6327 | | |
| Tallahassee, FL 32399 | Tallahassee, | FL 32314 | |
| Enclosed is a check for the following amount: | | | |
| \$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 | . Kabo Technical Support Services, Inc. | | | | | | |
|---|--|------------------------|--|----------------------------|-----------------------------------|--|--|
| | (Name of corporation: must include the word "INCORPORATED," of like import in language as will clearly indicate that it is a corpor contained in the name at present.) | "COMP ation ins | 'ANY", "CORPORATIC tead of a natural perso | N" or words on or partners | or abbreviations hip if not so | | |
| 2. | British Virgin Islands | 3. | Applied for | | | | |
| | (State or country under the law of which it is incorporated) | · - | | El number, if applicable) | | | |
| 4. | March 10, 1999 | 5. | Perpetual | | | | |
| | (Date of Incorporation) | | Duration: Year corp. wi | Il cease to ex | ist or "perpetua | | |
| 6. | | | | 03 00 | NSIC: | | |
| | (Date first transacted business in Florida, (SEE SECTIONS 60 | 7.1501, | 607.1502, AND 817.1 | 55, F. S .) 4 | の共一 | | |
| 7. | 7038 N.W. 50 Street, Miami, FL 33166 | | | | SAL | | |
| | | | | - X | 경 특다 모 S | | |
| | (Current mailir | a addre | .cc/ | | 27 | | |
| 8. | | ig addie | 33) | 60 | 0 F | | |
| (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) | | | | | | | |
| 9. | Name and street address of Florida registered ag | ent: (P | .O. Box or Mail Dro | op Box <u>NO</u> | <u>T</u> acceptable | | |
| Name: Geoffrey M. Wayne, Esq. | | | | | | | |
| Office Address: 1201 Brickell Ave., Suite 220 | | | | | | | |
| | Miami, Florida, 33131-3207 (Zip Code) | | | e. | - | | |
| 10 |). Registered agent's acceptance: | | | | | | |
| pla ca, | aving been named as registered agent and to accept service of pro ace designated in this application, I hereby accept the appointment pacity. I further agree to comply with the provisions of all statutes rformance of my duties, and / am familiar with and accept the oblig | as regis relative t | stered agent and agree to the proper and comp | e to act in this plete | | | |
| | Registered agent's signa | ture) | | | •• | | |

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 addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable) A. DIRECTORS (Street address only- P. 0. Box NOT acceptable) Chairman: N/A Address: N/A Vice Chairman: N/A Address: N/A Director: Larry Walston Address: 7038 N.W. 50th Street, Miami, Florida 33166 Director: N/A Address: ____N/A OFFICERS (Street address only- P. 0. Box NOT acceptable) President: N/A Address: N/A Vice President: <u>Larry Walston</u> Address: 7038 N.W. 50th Street, Miami, Florida 33166 Secretary: N/A Address: N/A Treasurer: N/A Address: N/A 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) Larry Walston, Vice President

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

