Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Phone	: (850)222-			
	Fax Number	: (850)878-	5368		
FOR	EIGN PROFIT	/NONPROFI	T CORPORA	TION	17.17.1 10.18.1
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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: New Filing Section Division of Corporations	•					
SUBJECT: SOKAL MEDIA GROUP, INC.						
Name of corporation - must include suffix						
Dear Sir or Madam:						
The enclosed "Application by Foreign Corporation" Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by	on for Authorization to Transact Business in Florida," I Standing" and check are submitted to register the ousiness in Florida.					
Please return all correspondence concerning this a	natter to the following:					
Mark Sokal						
Nat	ne of Person					
SOKAL MEDIA GROUP, INC.						
Fire	/Company					
11000 Regency Plaza, Suite 402						
	Address					
Cary, North Carolina 27518						
City/S	tate and Zip code					
asafur@sokalmediagroup.com						
E-mail address: (to be	used for future annual report notification)					
For further information concerning this matter, pl	case call:					
April Safar at (90	8 206-9750					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
\$70.00 Filing Fee \$\times \text{S78.75 Filing Fee & Certificate of Status}						

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. SOKAL MEDI	A GROUP, INC.					
	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	_		
*	•	ame	adopted for the purpose of transacting business in Floring	da)		
2. NORTH CARO		_ 3.	(FEI number, if applicable)			
	under the law of which it is incorporated)		, , , , , , , , , , , , , , , , , , , ,			
4. 10/6/2009		5.	"perpetual"			
(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual	l")		
6. January 31, 201						
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7. 11000 Regency I	Plaza, Suite 402, Cary, North Carolina 275	18				
·	(Principal office		ress)			
11000 Regency P	Plaza, Suite 402, Cary, North Carolina 275	18		- 67	3	•
	(Current mailing	нd	iross)	7.17	\Box	
				-	5	
8. To obtain and m	aintain advertising clients.		ountry to be carried out in state of Florida)	<u> </u>	23	
(l'urpose(s	s) of corporation authorized in home state	or o	ountry to be carried out in state of Florida)	====	À	
9. Name and street	et address of Florida registered agent:	(P.	D. Box NOT acceptable)	12) 82	=== ===	<u>_</u>
Name:	C T Corporation System		731 - yi	77	27)	
Office Address:	1200 South Pine Island Road		,			
	Plantation		, Florida 33324 (Zip code)			
	(City)		(Zip code)			
Having been nan designated in this further agree to c and I am familia By	s application, I hereby accept the upper comply with the provisions of all status r with and accept the obligations of m C T Corporation System (: (Registered upon 's signal certificate of existence duly authenticate	tes y pr	Assistant Secre	apacit f my i ja tery	ty, I luties,	•
the Department o	f State, by the Secretary of State or oth	er (official having custody of corporate records in the ju-	arisdio	cuon	

PLOIS - 10/05/2010 C T System Ontine

under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chuirman: Mark Sokal	
Address: 11000 Regency Plaza, Suite 402, Cary, North Carolina 27518	-
Vice Chairman:	
Address:	
Disaster	
Director:	
Address:	<u> </u>
Director:	: :: : : : : : : : : : : : : : : : : :
Address:	
B. OFFICERS	6
President: Mark Sokal	
Address: 11000 Regency Plaza, Suite 402, Cary, North Carolina 27518	
	The state of the s
Vin Devident	
Vice President:	
Address:	

Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application	listing additional officers and/or directors.
13.	
Signature of Director or C The officer or director signing this document (and who is listed in nur are true and that he or she is aware that false information submitted in third degree felony as provided for in s.817.155, F.S.	mber 12 above) affirms that the facts stated herein
Mark Sokal/President	

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

PLOTE - (0/05/2016 C T System Online



NORTH CAROLINA Department of The Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

SOKAL MEDIA GROUP, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 6th day of October, 2009, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



Elaine I. Marshall Certification# 90995718-1 Reference# 10354098- Page: I of 1

Verify this certificate online at www.secretary.state.no.us/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 2nd day of December, 2010.

Secretary of State