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14 AUG 19 PH 12: 53

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 SATE OF FLORIDA.

(If name is unavailal	ble in Florida, enter alternate corporate na	me adopted	for the purpose of transacting business in Florida)	
Delaware		3		
(State or country under the law of which it is incorporated)			(FEI number, if applicable)	
August 19,2014, but effective August 13, 2012		5	Perpetual	
(Date of incorporation)		(Duration: Year corp., will cease to exist or "perpetual")		
Angn	st 13, 2012			
	business in Florida, if prior to registration	n)		
	07.1501 & 607.1502, Florida Statutes, to d		nalty liability)	
1100	Samina Contro South Suite 200 A	ltama anta (Parings Florido 20714	
1100	Spring Centre South, Suite 209, A (Principal office address)	namonte :	Springs, Florida 32714	
	(i timelpai office address)			
1180	Spring Centre South, Suite 209, A	(4		
	Spring Centre South, State 207, A	itamonte :	Springs, Florida 32714	
	(Current mailing address)	itamonte :	Springs, Florida 32714	
-	(Current mailing address)		· · · ·	
-			ox NOT acceptable)	
Name and street	(Current mailing address) address of Florida registered agent		ox NOT acceptable)	
-	(Current mailing address)		ox NOT acceptable)	
Name and <u>street</u> Name:	(Current mailing address) address of Florida registered agent Gregory W. Meier, Esq.	:: (P.O. B	ox NOT acceptable) SECRETATION AND 19	
Name and <u>street</u> Name:	(Current mailing address) address of Florida registered agent	:: (P.O. B	ox NOT acceptable) SECRETATION AND 19	
Name and <u>street</u> Name:	(Current mailing address) address of Florida registered agent Gregory W. Meier, Esq. Shuffield, Lowman & Wilson, I	:: (P.O. B	ox NOT acceptable) SECRETATION AND 19	
Name and <u>street</u> Name:	(Current mailing address) address of Florida registered agent Gregory W. Meier, Esq. Shuffield, Lowman & Wilson, I 1000 Legion Place, Suite 1700	:: (P.O. B	ox NOT acceptable) SECRETATION ALLAHASSS	
Name and street Name: Office Address: Registered agent	(Current mailing address) address of Florida registered agent Gregory W. Meier, Esq. Shuffield, Lowman & Wilson, I 1000 Legion Place, Suite 1700 Orlando, FL 32801 's acceptance:	:: (P.O. B	OX NOT acceptable) OX NOT acceptable) OX NOT acceptable)	
Name and street Name: Office Address: Registered agent Having been na	(Current mailing address) address of Florida registered agent Gregory W. Meier, Esq. Shuffield, Lowman & Wilson, I 1000 Legion Place, Suite 1700 Orlando, FL 32801 's acceptance: med as registered agent and to	:: (P.O. B	ox NOT acceptable) AUG 19 PH 12: 53 Pervice of process for the above-stated	
Name and street Name: Office Address: Registered agent Having been na	(Current mailing address) address of Florida registered agent Gregory W. Meier, Esq. Shuffield, Lowman & Wilson, I 1000 Legion Place, Suite 1700 Orlando, FL 32801 's acceptance: med as registered agent and to the place designated in this applicat	e: (P.O. B	ox NOT acceptable) AHASSEE HORIZON SECRETARIAN SECRET	
Name and street Name: Office Address: Registered agent Having been na corporation at the agent and agree	(Current mailing address) address of Florida registered agent Gregory W. Meier, Esq. Shuffield, Lowman & Wilson, I 1000 Legion Place, Suite 1700 Orlando, FL 32801 's acceptance: med as registered agent and to e place designated in this applicat to act in this capacity. I further a	t: (P.O. B P.A. accept so ion, I here	ox NOT acceptable) AUG 19 PH 12: 53 Pervice of process for the above-stated	

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.

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

Title(s)	Name	Business Address
Director, President,	Matthew Bohannon	1180 Spring Centre South, Suite 209
Secretary and Treasurer	<u> </u>	Altamonte Springs, FL 32714
Director and Vice	Joseph W. Gallagher	1180 Spring Centre South, Suite 209
President	_	Altamonte Springs, FL 32714

12.	The execution of this	application constitutes an affirmation under the penalties of perjury that the facts
	stated herein are true,	and that he or she is aware that false information submitted in a document to the
	Department of State	constitutes a third degree felony as provided for in Section 817.155, Florida
	Statutes	A

(Signature of Director of Officer listed in Number 11 of this application)

Matthew Bohannon, President and Director
(Typed or printed name and capacity of person signing application)



PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BC, BEAN AND BONE 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 EIGHTEENTH DAY OF AUGUST,

A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BC, BEAN AND BONE INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF AUGUST, A.D. 2014.

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

14 AUG 19 PH 12: 53
SECRETARY OF STATE
SECRETARY OF STATE

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AUTHENTY CATION: 1628680

DATE: 08-18-14

You may verify this certificate online at corp.delaware.gov/authver.shtml