Page 1 of 1

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H140002779373)))



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Division of Corporations

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From:

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Account Number: 075410301517 Phone : (561)833-7700 Fax Number : (561)655-8719

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#### FOREIGN PROFIT/NONPROFIT CORPORATION Zone Labs, Inc.

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### (((H14000277937 3)))

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA.

IN COMPLIANCE WITH SECTION 607, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO PREGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

*Inc* "Co.," "C	orp," "Inc," "Co," or "Corp,")					
_	•	adopted for the purpose of transacting business in Florida)				
Delaware		3 04-3569473				
	y under the law of which it is incorporated)	(FEI number, it upplicable)				
07/23/20	O I (of incorporation)	Perpetual				
12210	от неограния)	Duration: Year corp. will cease to exist or "perpetual")				
·	(Date lies transacted business	in Horida. If prior to registration)				
	(SEE SECTIONS 607.1501 & 607.1	1502, F.S., to determine penalty liability)				
21 Tioga	Way, Marblehead, MA 019					
	(Principal office ad	dress)				
21 Tioga	Way, Marblehead, MA 019	945				
	(Cerrent mailing add	dress)				
Manna mad assess	et address of Florida registered agent: (P.	O Pay MOT assumbled				
. Name and <u>Succ</u>	Barry D. Sears	O. Box NOT acceptable)				
Name:						
ffice Address:	4125 SW Martin Highwa	ay ූඩ්				
	Palm City	Florida 34990				
	(City)	(Zip code)				
Darietana na	ent's acceptance and as registered agent and to accept serv	vice of process for the above stated corporation at the p				
laving been nan						
laving been nam esignated in this orther agree to c	application, I hereby accept the appoint	iment as registered agent and agree to act in this capac relative to the proper and complete performance of m of my position as registered agent.				

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.

## (((H14000277937 3)))

		s addresse	s of officers and/or	directo	rs:					
A. DIRE	CTORS  Dr. Barry	/ D. Se	ars			, •			:	
Chairman:	21 Tioga	Way,	Marblehead,	MA	01945					
Address.										. `
~ Vice Chair										
									• :	
							:			
Director: .							·-·-			
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	Dr. Barn							5	ا ــــ	1
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vice Presi	dent:							<u> </u>		·
Address:		<del></del>			, ·			J# .		<del></del>
Tana daya	Dr. Barr	y D. S	ears		:				<del></del>	•
Addenses	21 Tioga	Way,	Marblehead,	MA	01945			• .		٠.,
	Martha l									
			Marblehead	, MA	01945		·			
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are true a	nd that he or s	he is awar	s document (and wi e that false informa- for in s.817.155, F.	ho is lii nion su	itéd in number 1					
	•	-	President							
	. <u> </u>	(Typed o	r printed name and	capacit	y of person sign	ing application	n)			- 7

(((H140002779373)))

# Delaware

PAGE 1

## The First State

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

DELAWARE, DO HEREBY CERTIFY "ZONE LABS, 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 SECOND DAY OF DECEMBER,

A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZONE LABS, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF JULY, A.D. 2001.

3412585 8300

141471873

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

Jeffrey W Bullock Secretary of State
AUTHENTX CATION: 1911078

DATE: 12-02-14