

F14000005285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

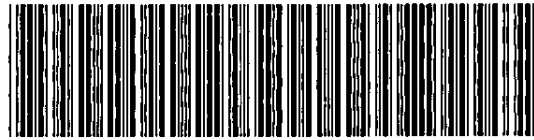
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14 DEC 15 AM 9:10  
STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

12/16/14 CR

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**DATE: 12/15/14**

**NAME: EXHALE ENTERPRISES XXVIII, INC.**

**TYPE OF FILING: APPLICATION**

**COST: 78.75**

**RETURN: CERTIFIED COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**

*Abbie Hodge*

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**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. Exhale Enterprises XXVIII, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 47-2502052

(FEI number, if applicable)

4. 12/8/2014

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 250 W. 57th Street, Suite 1901, New York, NY 10107

(Principal office address)

250 W. 57th Street, Suite 1901, New York, NY 10107

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Exhale Enterprises X, Inc.

Office Address: 200 Biscayne Blvd.

Miami

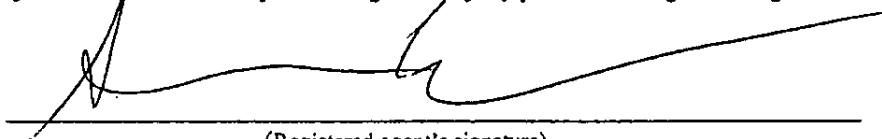
(City)

Florida 33131

(Zip code)

9. 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)

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.

14 DEC 15 AM 9:10  
STATE  
TALLAHASSEE FLORIDA

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Annbeth Eschbach  
~~Vice Chairman:~~

Address: 250 W. 57th Street, Suite 1901  
New York, New York 10107

Director: Julia Sutton

Address: 250 W. 57th Street, Suite 1901  
New York, New York 10107

Director: Randy Brown

Address: 250 W. 57th Street, Suite 1901  
New York, New York 10107

14 DEC 15 AM 9:10  
FAL ANS ECHBACH

**B. OFFICERS**

CEO: Annbeth Eschbach  
~~President:~~

Address: 250 W. 57th Street, Suite 1901  
New York, New York 10107

COO: Julia Sutton  
~~Vice President:~~

Address: 250 W. 57th Street, Suite 1901  
New York, New York 10107

Secretary: Randy Brown

Address: 250 W. 57th Street, Suite 1901, New York, New York 10107

CFO: Randy Brown  
~~Treasurer:~~

Address: 250 W. 57th Street, Suite 1901, New York, New York 10107

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms 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 s.817.155, F.S.

13. Annbeth Eschbach, CEO  
(Typed or printed name and capacity of person signing application)

# Delaware

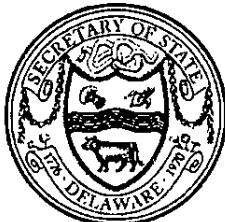
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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EXHALE ENTERPRISES XXVIII, 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 TWELFTH DAY OF DECEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EXHALE ENTERPRISES XXVIII, INC." WAS INCORPORATED ON THE EIGHTH DAY OF DECEMBER, A.D. 2014.

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



5653312 8300

141529656

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1952284

DATE: 12-12-14