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Special Instructions to Filing Officer:				





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COVER LETTER

TO:	New Filing Sec Division of Cor			
SUBJ	ECT:	DRNS	CORPORC	Hon
		Name of corporat	ion - must include suffix	,
Dear S	Sir or Madam:			
"Certi	ficate of Existenc	ion by Foreign Corporation (e," or "Certificate of Good S n corporation to transact bus	standing" and check are sub	
Please	return all corresp	ondence concerning this ma	tter to the following:	
	Mar	C Nacsor	of Person	
	ORN	SCORP		
			ompany	
	40 28	th Street	Idress	-
R	rookii	in Ny	11220	
	0 (0	City/Stat	e and Zip code	
<u>in</u>	4000	City/Stat Wec+pvc E-mail address: (to be use	ed for future annual report r) notification)
For fu		concerning this matter, pleas		·
<u> </u>	Name of Perso	10800 at (718	ea Code & Daytime Teleph	5 30 one Number
	STREET/COUNTY Sec Division of Corclifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations 7
Enclos	sed is a check for	the following amount:		
53 \$76	0.00 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.
DRNS Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
(It have unavariable in Tibrida, enter atternate corporate name adopted for the purpose of transacting business in Tibrida)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1985 5. Perpetua
(Date of incorporation) (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. 140 58 th Street Unit 3F Brooklyn NY 11220
(Principal office address)
140 58Th Street Unit 3- Brooklyn My 112.
(Carrett Married)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Nac San Es 5
Office Address: 9193 CLEOCHILL ROCK
Bounton Boach 1 33472 # 5 F
$\frac{\text{City}}{\text{City}}, \text{Florida} \xrightarrow{\text{Cip code}} \qquad $
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.
$\mathcal{M}_{\mathcal{A}}$

10. Attached is a <u>certificate of existence</u> 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 addresses of officers and/or directors: A. DIRECTORS Chairman: Address: _ Vice Chairman: Address: Director: Address: __ Director: Address: _ **B. OFFICERS** President: __ Marc Brooklyn Vice President: Address: ____ Secretary: Address: ____ Treasurer: __ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of DRN'S CORP. was filed on 11/05/1984, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



SECONDUCTOR STATE

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 23rd day of February two thousand and fifteen.

Executive Deputy Secretary of State