

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (050)617-6381

Erom:

Account Name : HARVARD BUSINESS SERVICES,

Account Number : I20080000045

Fam Number

Phone : (302)645-7400 : (302)645-1280

Enter the email address for this business entity to be used fo配類tuce** annual report mailings. Enter only one email address please

Email Address:

usa@zoner.com

FOREIGN PROFIT/NONPROFIT CORPORATION ZONER, Inc.

Certificate of Status	1
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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.

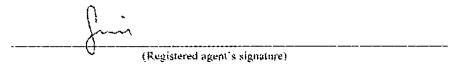
1. ZONER, Inc.

(Enter name of corporation: must include "INCORPORATED." "COMPANY." "CORPORATION."

(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)	
, Delaware	;	3 .	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
02/09/20	15	Perpetual	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
No busin	ess transacted in Florida	prior to registration	
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
3902 Hen	derson Blvd. Ste 208-187		
	(Principal office ac		
- 3902 Hen	derson Blvd. Ste 208-187, '	lamna Fiorida 33629 ***	
JJU4 1 (61)	and the second s	p-O1 page	
	(Current mailing ac	idress) 57	
3. Name and stre	(Current mailing ac et address of Florida registered agent; (F	Address) P.O. Box NOT acceptable)	
3. Name and <u>stre</u> Name:	(Current mailing ac	Address) AR O. Box NOT acceptable) AR AR AR AR AR AR AR AR AR A	
3. Name and stre	(Current mailing ac et address of Florida registered agent: (F Roman Slavicinsky 3902 Henderson Blvd. Ste 208	Address) P.O. Box NOT acceptable) P.O. Box NOT acceptable)	

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.



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.

MAR-10-2015 15:26 From:	To:18506176381	Page:3/4	
	(((H15	(((H15000061226 3)))	
11. Names and business addresses of officers and/or directors:		FILED	
A. DIRECTORS	15 1	MAR 10 AH 8: L	
Chairmen:	SECRA	TARY ACTOR	
Address:	1 1 1 m 4 2 m 4 2 m 5 m	HASSEE, FLORID	
	gagaragan po mo a agrana supanamana, ma moto font etaphyderiote et sitt stop don open supan	P-47-47-81-61-61-61-61-61-61-61-61-61-61-61-61-61	
Vice Chairman:			
Address:			
The state of the s			
Director:		***************************************	
Address:		nia unumakakakakakakakakakakakakakakakakakakak	
Director:			
Address:	and a subtraction for the substitute and the substitute and the substitute and su		
3902 Henderson Blvd. Ste 208-187			
Tampa, Florida 33629			
Vice President:			
Address:	,		
Secretary.	·		
Address:			
Treasurer:		and the state of t	
Address:			
NOTE: If necessary, you may attach an addendum to the application list	-	ectors,	
12. Signature of Director or Offic	cer		
The officer or director signing this document (and who is listed in number are true and that he or she is aware that false information submitted in a cathird degree felony as provided for in s.817.155, F.S.	er 12 above) affirms that the facts		
B. Roman Slavicinsky, President			
(Typed or printed name and capacity of person s	igning application)	**************************************	

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ZONER, 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 TENTH DAY OF MARCH, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ZONER, INC."
WAS INCORPORATED ON THE NINTH DAY OF FEBRUARY, A.D. 2015.

FILED

15 MAR IO M 8: 48
SECRETARY OF STATE
SECRETA

5689833 8300

150337844

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

Jeffrey W. Bullock, Secretary of Sta AUTHENTICATION: 2185866

DATE: 03-10-15

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