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(Re	equestor's Name)			
(Ad	ldress)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·		
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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SUFFICIENCY OF FILING

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FILED
SLORETARY OF STATE
AHASSER OF STATE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE : 573270 7676095

AUTHORIZATION

COST LIMIT : (\$\87.50

ACCOUNT NO. : I2000000195

ORDER DATE : April 1, 2015

ORDER TIME : 9:56 AM

ORDER NO. : 573270-015

CUSTOMER NO: 7676095

FOREIGN FILINGS

NAME: HARDYL, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX____ CERTIFIED COPY

YX_____ PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Hardyl, Inc.				
	ation - must include suffix			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact by				
Please return all correspondence concerning this m	natter to the following:			
Stewart H. Lapayowker, Esq.				
Nam	e of Person			
Stewart H. Lapayowker, P.A.				
Firm/	Company			
5360 NW 20th Terrace Suite 205				
A	Address			
Fort Lauderdale, Florida 33309				
City/Sta	ate and Zip code			
LArndt@cdlcpa.com	·			
E-mail address: (to be u	sed for future annual report notification)			
For further information concerning this matter, ple	ase call:			
Stewart H. Lapayowker 954	202-9600			
	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Sertified 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.

1.	Hardyl, inc.						
	(Enter name of c	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	,, ,,	'COMPANY," "CORPORATION,"			=
	(If name unavaila	able in Florida, enter alternate corporate name	ado	opted for the purpose of transacting busing	ess in Flo	orida)	
2.	Delaware	3.					
(State or country under the law of which it is incorporated)			(FEI number, if applicable)				
4.	4. April 1, 2015			erpetual			
	(Date of incorporation)			(Duration: Year corp. will cease to exist or "perpetual")			
6.							
		(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1					
7	CDL, 505 S. Fla	gler Drive, Suite 900, West Palm Beach, I		• • •	产生	2015	
٠٠.		(Principal office add	lress	s)	<u> </u>	10 C	-17
CDL, 505 S. Flagler Drive, Suite 900, West Palm Beach, Florida 33401						-2	
		(Current mailing add	ress	s)	177) gra	Acres Laboration	T
					سے رہ سے	مات ب	_
8.	Name and stree	t address of Florida registered agent: (P.0	O. E	Box NOT acceptable)			
	Name:	Louis M. Cohen		· · ·		വ	
Of	ffice Address:	CDL, 505 S. Flagler Drive, Suite 900		•			
	2-	West Palm Beach	•	 33401 . Florida			
		(City)		(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) Louis M. Cohen

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 addresses of officers and/or directors: A. DIRECTORS Chairman: __ Address: Vice Chairman: James H. Clark Director: CDL, 505 S. Flagler Drive, Suite 900 Address: West Palm Beach, Florida 33401 Director: **B. OFFICERS** James H. Clark President: CDL, 505 S. Flagler Drive, Suite 900 Address: West Palm Beach, Florida 33401 Vice President: Louis M. Cohen Secretary: Address: CDL, 505 S. Flagler Drive, Suite 900, West Palm Beach, Florida 33401 Treasurer: Louis M. Cohen Address: CDL, 505 S. Flagler Drive, Suite 900, West Palm Beach, Florida 33401 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. 13. Louis M. Cohen, Secretary

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "HARDYL, 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 APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HARDYL, INC."

WAS INCORPORATED ON THE FIRST DAY OF APRIL, A.D. 2015.

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

5721424 8300

150457078

AUTHENT'S CATION: 2258359

DATE: 04-02-15

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