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Florida Department of State  
Division of Corporations  
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Division of Corporations  
Fax Number : (850) 617-6381

From:

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SECRETARY OF STATE  
ATTN: ASSESSMENT DIVISION

2015 APR 30 AM 10:56

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**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Altitude Ventures Holding Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

5/1/15

15 APR 30 PM 5:04  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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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. Altitude Ventures Holding Inc.**

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

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

**2. Delaware** **3. N/A**  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

**4. March 8, 2010** **5. Perpetual**  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

**6. Upon filing of this application**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 9800 NW 41 Street, Miami, FL 33178**

(Principal office address)

**9800 NW 41 Street, Miami, FL 33178**

(Current mailing address)

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

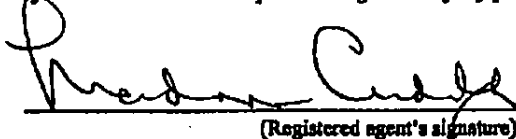
Name: **CT Corporation System**

Office Address: **1200 S. Pine Island Road, Suite 250**

**Plantation**, Florida **33324**  
(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)

**Madonna Cuddy**  
**Special Assistant Secretary**

**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.**

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DEPARTMENT OF STATE

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

A. DIRECTORS

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

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

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

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

Director: Ira M. Birns

Address: 9800 NW 41 Street, Miami, FL 33178

Director: Francis X. Shea

Address: 9800 NW 41 Street, Miami, FL 33178

B. OFFICERS

President: See the attached Exhibit "A"

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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. Amy A. Quintana, Asst. Secretary

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

4/30/2015 4:51:30 PM From: To: 8506176381( 4/5 )

**Exhibit "A"**

**The address for each of the officers listed below is:  
9800 NW 41 Street, Miami, FL 33178**

**OFFICERS:**

**PRESIDENT:**

**Brandon Spear**

**SR. VICE PRESIDENT - FINANCE:**

**Richard D. McMichael**

**SR. VICE PRESIDENT, TREASURER:**

**Adrienne B. Urban**

**SECRETARY:**

**R. Alexander Lake**

**ASSISTANT SECRETARY:**

**Amy A. Quintana**

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# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ALTITUDE VENTURES HOLDING 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 THIRTIETH DAY OF APRIL, A.D. 2015.

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.

4796832 8300

150591460

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: 2336709

DATE: 04-30-15