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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: 6LOBAL X GROUP , NC. Name of corporation - must include suffix	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
LEX BARKER	
Name of Person	
LEX BARKER Name of Person GOBAL X GROUP /NC. Firm/Company 14150 SW 129th Street Address	
Firm/Company	
14150 SW 129th Street	
MIAMI FCORIDA 33186 City/State and Zip code 9+9 Corp D gmail. Com E-mail address: (to be used for future annual report notification)	
City/State and Zip code	
9+9 COIP @ gmail. Com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Lex Barker at (678) 374 /126 Name of Person Area Code & Daytime Telephone Number	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, 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. (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. DE
(State or country under the law of which it is incorporated)

4. 22LA Feb 2008
(Date of incorporation)

5. PERPETUA FEB 2008
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 141.50 SW 12972 Street

(Principal office address)

MIAM (FL 33186

(Current mailing address) 8. AIR CARRIER & AUIATION/AEROS PACE SUPLE EN/Cousnieur

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agant. Name: Office Address: 14150 SW 1297 STREE?

MIANI , Florida 33166

(City) (Zip code) 10. 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)

11. 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.

12. Names and Business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	LEX BARILET
Address:	6366 Consbugg La
	LEX BARILET 6366 Consibling Lin Str MK GA 30087
Director:	
Address:	
	·
B. OFFICERS	
President:	LEX BARKER
Address:	6366 CONISBURGH LANE
	GONE MOUNTAIN GA 30-87
Address:	
Secretary:	LEX BARKER
Address:	SORE MOUNTAIN GA 30087
Treasurer:	STONE MOUNTAIN 6A 30087
Address:	
	ary, you may attach an addendum to the application listing additional officers and/or directors.
13	Signature of Director or Officer
The officer or dire	Signature of Director or Officer ctor signing this document (and who is listed in number 12 above) affirms that the facts stated herein or she is aware that false information submitted in a document to the Department of State constitutes
	ny as provided for in s.817.155, F.S. LEX BARKER
14	(Typed or printed name and connective of person signing application)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "GLOBAL X GROUP 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 TWENTY-SECOND DAY OF

APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLOBAL X GROUP INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2008.

4508437 8300

150545387

AUTHENTACATION: 2313950

DATE: 04-22-15

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