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OCT OR THE

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Bomboniere USA. Inc |
| 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: |
| Luis Namez |
| Name of Person |
| Bunjenga Printing Company Firm/Company |
| 25005 |
| 3509 Junapec (+ Address |
| 011.10 |
| Kaleigh N.C. 27616 City/State and Zip code |
| _ · · · · · · · · · · · · · · · · · · · |
| E-mail address: Ito be used for future annual report notification) |
| |
| For further information concerning this matter, please call: |
| Luis Narvaez at (919) 272 - 7868 |
| Name of Person Area Code Daytime Telephone Number |
| |
| STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration Section |
| Division of Corporations Division of Corporations |
| Clifton Building P.O. Box 6327 |
| 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: |
| \$70.00 Filing Fee \$\Boxed{\sigma}\$ \$78.75 Filing Fee & \$\Boxed{\sigma}\$ \$78.75 Filing Fee & 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.

| 1. | . Dombonière USA. Inc | |
|---------|--|--|
| | (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," | |
| | "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") | |
| | | |
| | Bomboniere Miami | |
| | (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bus | singer in Florida) |
| | | |
| 2. | North Carolina 3 | |
| | . North Carolina (State or country under the law of which it is incorporated) (FEI number, if applica | ıble) |
| | | |
| 4. | . August 26 th , 2015 5. (Date of duration, if other than | |
| | (Date of incorporation) (Date of duration, if other than | perpetual) |
| 6. | August 26,2015 | |
| 0. | (Date first transacted business in Florida, if prior to registration) | ···· |
| | (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) | |
| | | |
| | 1725 (1.5 , 6 20, 11 5 | , NO 27027 |
| 7 | . 1725 S. Main Street Suite 201 Wake Fores | + NC,27587 |
| 7 | . 1725 S. Main Street Suite 201 Wake Fores (Principal office address) | <u>1 NC,275</u> 87 |
| 7 | . 1725 S. Main Street Suite 201 Wake Fores (Principal office address) | <u>+ NC,275</u> 87 |
| 7 | . 1725 S. Main Street Suite 201 Wake Fores (Principal office address) (Current mailing address, if different) | + NC,27587 |
| 7 | (Principal office address) | |
| 7 | (Principal office address) (Current mailing address, if different) | |
| 7 8. | (Principal office address) | |
| 7 8. | (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) | 2015 OCT SECRETA |
| | (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Luis Guilleano Nacvaez | ZOIS OCT |
| | (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Luis Guilleano Nacvaez | 2015 OCT -6 TALLAHASSEE |
| | (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: | 2015 OCT -6 PH SECRETARY OF TALLAHASSEE FI |
| | (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Luis Guilleamo Nacvaez Office Address: 755 N.W. 72nd Ave Plaza 31 Migmi , Florida 33126 | 2015 OCT -6 PH SECRETARY OF TALLAHASSEE FI |
| | (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: | 2015 OCT -6 PH I |

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)

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: Luis Narvaez |
| Address: 755 N.W. 72 Ave Plaza 31 |
| Address: 755 N.W. 72 Ave Plaza 31 Migmi FL 33126 |
| Vice Chairman: |
| Address: |
| |
| Director: |
| Address: |
| |
| Director: |
| Address: |
| |
| B. OFFICERS |
| President: |
| ος σ |
| 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. Leir Harran |
| 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 11 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. Luis Narvaez-President |
| (Typed or printed name and capacity of person signing application) |



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

BOMBONIERE USA, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 26th day of August, 2015, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of October, 2015.

Elaine J. Marshall

Secretary of State