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Office Use Only



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COVER LETTER

	Registration Section Division of Corpor					
	YNET HOLD					
SUBJE	CT:	Name of	assumption.	*********	nclude suffix	
		Name of	corporation	- must n	icitide stillx	
Dear Sir	or Madam:					
"Certific	losed "Application cate of Existence," ferenced foreign of	or "Certificate o	f Good Stan	ding" an	d check are sub	ct Business in Florida," emitted to register the
	eturn all correspond K MOYAL	dence concernin	g this matter	to the fo	ollowing:	
			Name of I	Person		
MOYAL	ACCOUNTING SE	RVICES INC				
			Firm/Com	pany		
10796 PI	NES BLVD SUITE	204				
			Addre	ess		
PEMBRO	OKE PINES FLORII	DA 33026				
			City/State a	nd Zip co	ode	- Mg 4 (MM)
PATRIC	K@MOYALACCO	UNTING.COM				
		E-mail address:	(to be used f	or future	annual report i	notification)
For furth	ner information col	ncerning this ma	tter, please c	ali:		
PATRICK MOYAL		954	430-3930			
		a	\ 	_)		
	Name of Person		Area Cod	e	Daytime Telep	hone Number
	STREET/COURI Registration Section Division of Corporal Clifton Building 2661 Executive Co Tallahassee, FL 3	on rations enter Circle	:		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
Enclose	d is a check for the	following amou	int:			
\$70.0	00 Filing Fee	\$78.75 Filing Certificate of			Filing Fee & ed Copy	S87.50 Filing Fcc, Certificate of Status &

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. YNET HOLDING INC 1. (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) (State or country under the law of which it is incorporated)

(FEI number, if applicable) (Date of incorporation) January 1, 2016 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 10796 PINES BLVD SUITE 204 PEMBROKE PINES FLORIDA 33026 (Principal office address) SAME AS PRINCIPAL OFFICE ADDRESS (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) MOYAL ACCOUNTING SERVICES INC Name: 10796 PINES BLVD SUITE 204 Office Address:

9. Registered agent's acceptance:

PEMBROKE PINES

(City)

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.

. Florida

(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 MOSHE CASTIEL	2015 DEC 28 PM 3:40
Chairman: 92 HAMPSTEAD RD HAMPSTEAD QUEBEC, CANADA H3X1K6	V(7) 3.
Address:	37. 40 PM 3. 40
	TALLAHASSEE TLORIA
Vice Chairman:	· · · · · · · · · · · · · · · · · · ·
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President:	
Address:	
Vice President:	
Address:	60 PM 1-10 PM 4
Secretary:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition	al officers and/or directors.
12. Moshe Captiel	
Signature of Director of Officer	officers that the feat start I have
The officer or director signing this document (and who is listed in number 11 above) are true and that he or she is aware that false information submitted in a document to	
a third degree felony as provided for in s.817.155, F.S.	
MOSHE CASTIEL 13.	
(Typed or printed name and capacity of person signing appli	cation)

Québec

CERTIFICAT DE CONSTITUTION

Loi sur les compagnies, Partie IA (L.R.Q., chap. C-38)

J'atteste par les présentes que la compagnie

GESTION YNET INC.

et sa ou ses version(s)

YNET HOLDING INC.

a été constituée le **19 JUILLET 2010**, en vertu de la partie IA de la Loi sur les compagnies, comme indiqué dans les statuts de constitution ci-joints.





Déposé au registre le 22 juillet 2010 sous le numéro d'entreprise du Québec 1166731050

Registraire des entreprises

OEC 28 PM 3: 40 Les actions du capital-actions de la Compagnie sont sujettes à des restrictions sur le transfert. La Compagnie en remettra du capital-actions de transférable(s) seulement au registre des transterts de la Compagnie par ledit détenteur en personne ou son procureur dûment ACTION(S) LOI SUR LES COMPAGNIES (QUÉBEC) CAPITAL-ACTIONS AUTORISÉ: voir ANNEXE A des statuts de constitution CONSTITUÉE EN CORPORATION EN VERTU DE LA EN FOI DE QUOI, la Compagnie a dûment fait signer le présent certificat gratuitement le texte intégral à tout actionnaire qui en fera la demande. PARTIE 1A LES PRÉSENTES ATTESTENT QUE MOSHE CASTIEL autorisé, sur remise du présent certificat dûment endossé. CATEGORIE YNET HOLDING INC. Moshe Castiel, président 5 octobre 2010 détenteur immatriculé de . NUMÉRO action(s) CERTIFICAT catégorie octobre 2010 Moshé Castiel **A**/1 100 NOMBRE D'ACTION(S) TRANSPORTÉE(S) NOMBRE D'ACTION(S) ÉMISE(S) ÉMIS EN FAVEUR DE N' DU CERTIFICAT ORIGINAIRE THANSPORT DE ACTION(S). DATÉ DU: ² DATÉ DU: POUR.