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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. 🕉

Email	Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION SYMBEII CORPORATION

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S. YOUNG

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Help

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	'COMPANY," "CORPORATION,"	••
(If name unavaila DE	ble in Florida, enter alternate corporate name ad	opted for the purpose of transacting busine /a	ess in Florida)
2	3		,
(State or country 01/19/2016	y under the law of which it is incorporated)	(FEI number, if applicable))
4	5		
(Date Upon Qualificat	of incorporation)	(Date of duration, if other than per	
6		شب. د چ	ध्य क
•	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150) bint Dr. STE 150A, Tampa, FL 33607	2, F.S., to determine penalty liability)	1 29 1 29
P.O Box 9022363	(Principal 2 San Juan, Puerto Rico 00902	office address)	
	(Current mailing	address, if different)	第 8
8. Name and stree	t address of Florida registered agent: (P.O.	Box NOT acceptable)	
	NORTHWEST REGISTERED AGENT I	LLC	
Name:	NORTHWEST REGISTERED AGENT		
Name:	3030 N. Rocky Point Drive, STE 15	0A	
	3030 N. Rocky Point Drive, STE 15	, Florida 33607 (Zip code)	

duties, and I am familiar with and accept the obligations of my position as registered agent.

Tom Glover/Manager/Northwest Registered Agent LLC (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: ___ Address: _ Vice Chairman: _____ James P. Yuille Jr P.O Box 9022362 San Juan, Puerto Rico 00902-2362 Address: __ **B. OFFICERS** James P. Yuille Jr President: P.O Box 9022362 San Juan, Puerto Rico 00902-2362 Address: __ Vice President: Address: _ James P. Yuille Jr Secretary: P.O Box 9022362 San Juan, Puerto Rico 00902-2362 Address: _ James P. Yuille Jr Treasurer: P.O Box 9022362 San Juan, Puerto Rico 00902-2362 Address: __ 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 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.

James P. Yuille Jr, President

13. __

Delaware

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "SYMBEII CORPORATION" 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-NINTH DAY OF JANUARY, A.D.

2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SYMBEII CORPORATION" WAS INCORPORATED ON THE NINETEENTH DAY OF JANUARY, A.D. 2016.

16 JAN 29 AN II: 06

Authentication: 201748701

Date: 01-29-16

5941112 8300 SR# 20160470434

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