## F160000000903

| (Requestor's Name)                      |                    |           |  |  |  |  |
|-----------------------------------------|--------------------|-----------|--|--|--|--|
| (Ad                                     | dress)             |           |  |  |  |  |
| (Ad                                     | dress)             |           |  |  |  |  |
| (Cit                                    | ty/State/Zip/Phone | e #)      |  |  |  |  |
| PICK-UP                                 | MAIT               | MAIL      |  |  |  |  |
| (Bu                                     | siness Entity Nan  | ne)       |  |  |  |  |
| (Document Number)                       |                    |           |  |  |  |  |
| Certified Copies                        | _ Certificates     | of Status |  |  |  |  |
| Special Instructions to Filing Officer: |                    |           |  |  |  |  |
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2016 FEB 25 PK 4: 32 SCORETARY OF STATE AND AHASSEE, FLORID

EXAMINER

FEB 29

## **COVER LETTER**

| TO:                                                                                                                 | Registration Se<br>Division of Cor |                                                                                              |                                                                                                    |                               | ,                                                                  |
|---------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------------------------|
| SUB                                                                                                                 | JECT: (A )OC                       | ld In Motion 1                                                                               | nc                                                                                                 |                               | •                                                                  |
|                                                                                                                     |                                    |                                                                                              |                                                                                                    | st include suffix             |                                                                    |
| Dear S                                                                                                              | Sir or Madam:                      |                                                                                              |                                                                                                    |                               |                                                                    |
| "Certi                                                                                                              | ficate of Existend                 | tion by Foreign Corporation<br>te," or "Certificate of Good<br>gn corporation to transact by | Standing                                                                                           | " and check are sub           |                                                                    |
| Please                                                                                                              | return all corresp                 | condence concerning this m                                                                   | atter to th                                                                                        | e following:                  |                                                                    |
|                                                                                                                     |                                    | Men'n Stewa                                                                                  | ar+                                                                                                |                               |                                                                    |
|                                                                                                                     |                                    |                                                                                              | e of Perso                                                                                         | on                            | ,                                                                  |
|                                                                                                                     |                                    | world in Mo                                                                                  | tion 1                                                                                             | ባ <b>ሮ</b>                    |                                                                    |
| •                                                                                                                   |                                    |                                                                                              | Company                                                                                            |                               |                                                                    |
|                                                                                                                     |                                    | 6823 SW 194#                                                                                 |                                                                                                    | 2                             |                                                                    |
|                                                                                                                     |                                    | A                                                                                            | ddress                                                                                             |                               |                                                                    |
|                                                                                                                     | 5                                  | w Nanches FL 3                                                                               |                                                                                                    |                               |                                                                    |
|                                                                                                                     |                                    | •                                                                                            | te and Zi                                                                                          | <del>-</del>                  |                                                                    |
|                                                                                                                     |                                    | E-mail address: (to be us                                                                    | Qua                                                                                                | hoo.com                       | A' (" A'                                                           |
|                                                                                                                     |                                    | E-mail address: (to be us                                                                    | sea for tu                                                                                         | ture annual report i          | nouncation)                                                        |
| For fu                                                                                                              | rther information                  | concerning this matter, plea                                                                 | ase call:                                                                                          |                               |                                                                    |
|                                                                                                                     |                                    | - l                                                                                          | 1                                                                                                  | 0.0001                        |                                                                    |
| <u> </u>                                                                                                            | Name of Perso                      | n Area                                                                                       | <u>t) _</u><br>Code                                                                                | Daytime Telepl                | hone Number                                                        |
|                                                                                                                     | 1141110 01 1 0100                  | 1100                                                                                         | 0000                                                                                               | isaytiino reiepi              | ione ivalibei                                                      |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle |                                    |                                                                                              | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |                               |                                                                    |
|                                                                                                                     | Tallahassee, FL                    |                                                                                              |                                                                                                    |                               |                                                                    |
| Enclos                                                                                                              | sed is a check for                 | the following amount:                                                                        |                                                                                                    |                               |                                                                    |
| \$7                                                                                                                 | 0.00 Filing Fee                    | ☐ \$78.75 Filing Fee & Certificate of Status                                                 |                                                                                                    | 3.75 Filing Fee & tified Copy | □ \$87.50 Filing Fee,<br>Certificate of Status &<br>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. World                  | In Motion Inc                                  |                       |                                                               |                            |
|---------------------------|------------------------------------------------|-----------------------|---------------------------------------------------------------|----------------------------|
| (Enter name of c          | orporation; must include "INCO                 | ORPORATED," "C        | OMPANY," "CORPORATION                                         | ,,                         |
| "Inc.," "Co.," "C         | Corp," "Inc," "Co," or "Corp.")                |                       |                                                               |                            |
|                           | , 1                                            |                       |                                                               |                            |
|                           | 1edical                                        |                       |                                                               |                            |
| (If name unavaila         | able in Florida, enter alternate c<br>NEW YORK | corporate name adop   | ed for the purpose of transacting                             | business in Florida)       |
| 2. 1-mited                | States of America                              | <b>23</b> 3. (        | 81-1460199                                                    |                            |
|                           | y under the law of which it is ir              |                       | (FEI number, if app                                           | olicable)                  |
| 1 7-10                    | -204                                           | *                     |                                                               |                            |
|                           | of incorporation)                              | J                     | (Date of duration, if other t                                 | han perpetual)             |
| ·                         | •                                              |                       | ,                                                             | ,                          |
| 6                         | (Date first trans)                             | acted business in Flo | rida, if prior to registration)                               | <del> </del>               |
|                           |                                                |                       | F.S., to determine penalty liability                          | y)                         |
| 7. 6823 S                 | iw 194th Ave                                   | En Bonah              | es FL 33332                                                   |                            |
| /. <u>@0e5 _</u>          | W MIN AVE                                      |                       | fice address)                                                 |                            |
|                           |                                                | •                     | ,                                                             |                            |
|                           |                                                | (Current mailing ad   | dress, if different)                                          | <u> </u>                   |
|                           |                                                | (4                    |                                                               |                            |
| 2 Name and stree          | et address of Florida register                 | red agent: (D.O. B    | NOT acceptable)                                               | 2                          |
| o. 14ame and <u>stree</u> | A address of Florida register                  | cu agent. (1.0. b)    | ix <u>NOT</u> acceptable)                                     | 25 LE                      |
| Name:                     | 1heun Stawar-                                  | <u> </u>              | •                                                             | 79 7                       |
| Office Address.           | 6823 SW 194th                                  | l Area                |                                                               | 4:32                       |
| Office Address:           | 6065 JU 1911                                   | AVE                   | -                                                             | <b>36. 37.</b>             |
|                           | SW Ranches FL                                  | 33332                 | , Florida <u><b>33332</b> </u>                                | , w                        |
|                           | (City)                                         |                       | (Zip code)                                                    |                            |
| 9. Registered age         | ent's accentance                               |                       |                                                               |                            |
|                           |                                                | to accept service o   | f process for the above stated                                | l corporation at the place |
| -                         | *-                                             | • •                   | as registered agent and agre                                  |                            |
| •                         |                                                | •                     | ive to the proper and comple<br>position as registered agent. |                            |
| umics, unu i um j         | инши тип ини иссері іне                        | . vviiganons oj my    | position as registered agent                                  |                            |
|                           |                                                |                       |                                                               |                            |
|                           | MSteword                                       | f                     |                                                               |                            |
| _                         |                                                | (Registered agent     | 's signature)                                                 | <del></del>                |
|                           |                                                | , 5                   | <del>-</del> •                                                |                            |

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: 16eMin Stewart Address: 10823 Sw) 194th Ave su) Monches FL 33332 Vice Chairman: \_\_\_\_\_ Address: Director: \_ Address: Director: \_\_\_\_ Address: **B. OFFICERS** Address: Vice President: <u>Jessica Pincus</u> Address: 6823 SW 194th Ave. SW Ranche FL 33337 Secretary: \_ Address: Treasurer: Address: \_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. MStoward 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.

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

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of WORLD IN MOTION INC was filed on 07/10/2014, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 17th day of February two thousand and sixteen.

Continy Scardina

Executive Deputy Secretary of State