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(Requestor's Name)		
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	MAIL	
(Business Entity Name)		
(Document Number)		
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APR 05<sup>2010</sup> J SHIVERS



Ξ.

TO: Registration Section Division of Corporations

SUBJECT:

Name of corporation - must include suffix

Dear Sir or Madam:

1 - in

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Virgin Press PBC

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: Max Kaganov

N		Name of	Person	
Virgin Press PBC				
<u></u>		Firm/Con	ipany	······
5455 SW 8th Street Suite	e 255			
<u></u>		Addr	ess	*
Miami, FL 33134				
	<u> </u>	City/State a	nd Zip code	
max@virgin.press				
	E-mail address: (	to be used	for future annual report	notification)
For further information Max Kaganov	n concerning this mat	ter, please	eall: 807-4358	
Name of Perso		(Area Cod	_)	· · · · · · · · · · · · · · · · · · ·
ivanie of Fersi	110	AltaCou	e Daytine reiej	phone Number
STREET/COURIER ADDRESS: Registration Section			MAILING ADDRESS: Registration Section	
Division of Corporations			Division of Corporations	
Clifton Building			P.O. Box 6327	
2661 Executiv Tallahassee, F	e Center Circle L 32301		Tallahassee,	FL 32314
Enclosed is a check for	the following amou	nt:		
■ \$70.00 Filing Fee	\$78.75 Filing I Certificate of		<b>\$78.75</b> Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & 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.

VIRGIN PRESS PBC Corporation

1 /	The cirporation		
(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," "( orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATIO	N."
	able in Florida, enter alternate corporate name ado	pted for the purpose of transacti	ng business in Florida)
Delaware 2.	-	-3853700	
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	oplicable)
4/21/2015	5.		
(Date	of incorporation) 5	(Date of duration, if other	r than perpetual)
6.			
5455 SW 8th Stre 7	Mani PI Min	F.S., to determine penalty liabi	lity)
		ddress, if different)	
<ol> <li>Name and <u>stree</u></li> <li>Name:</li> </ol>	et address of Florida registered agent: (P.O. E Max Kaganov	Box <u>NOT</u> acceptable)	<b>16 APR -</b> SECRETAI
Office Address:	5455 SW 8th Street Suite 255		I PH SEE.F
	Miami	Florida	SIA 2
	(City)	(Zip code)	

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

Ollic Gejevski nairman:	
2025 Meridian Avenue	
Miami Beach, FL 33139	• • • • • • • • • • • • • • • • • • •
e Chairman:	
dress:	······································
ector:	
dress:	
ctor:	
lress:	
OFFICERS Ollie Gejevski	5
ident:2025 Meridian Avenue ress:	>>> <b>h</b>
Miami Beach, FL 33139	A
President:	
ress:	
Max Kaganov etary:	
5455 SW 8th Street Suite 255, Miami FL 33134 ress:	
isurer:	
ress:	
TE: If necessary, you may attach an addendum to the applic	ation listing additional officers and/or directors.
11111 m	
Signature of Director e officer or director signing this document (and who is listed i	

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. <u>Mat</u> (Typed or printed name and capacity of person signing application)





The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VIRGIN PRESS PBC" 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 JANUARY, A.D. 2016.

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Authentication: 201717566 Date: 01-22-16

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SR# 20160321822 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1