FILOCOCO 2174

| uestor's Name) | | | | | |
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| Certificates | s of Status | | | | |
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COVER LETTER

| TO: | Registration Section | n | | | |
|--------------------------------------|--|--|-------|---|--|
| | Division of Corpor | ations | | | |
| SUBJ | ECT: e-Diner Desig | n & Marketing, Inc. | | | |
| | | Name of corpora | tion | - must include suffix | |
| Dear S | Sir or Madam: | | | | |
| "Certi | ficate of Existence," | by Foreign Corporation or "Certificate of Good or poration to transact but | Stan | ding" and check are sub | |
| Please | return all correspond | lence concerning this ma | atter | to the following: | |
| Mirian | n O. Frawley | | | | |
| | | Name | of I | Person | |
| e-Dine | r Design & Marketing, | Inc. | | | |
| | | Firm/C | Com | pany | |
| 139 SE | E 6th Street | | | | |
| | | A | ddre | SS | |
| Cape (| Coral, FL 33990 | | | | |
| | | City/Sta | te ar | d Zip code | |
| mirian | @e-dinerdesign.com | | | | |
| | | E-mail address: (to be us | ed f | or future annual report r | notification) |
| For fu | rther information con | cerning this matter, plea | se c | all: | |
| Miriam O. Frawley at (845) 781-6380 | | | | | |
| | Name of Person | Area (| Code | Daytime Telepl | none Number |
| Enclos | STREET/COURING Registration Section Division of Corpora Clifton Building 2661 Executive Centrallahassee, FL 32 ed is a check for the | n ations nter Circle 301 | | MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F. | ection prorations |
| □ \$ 70 | 0.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | | \$78.75 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.

| 1. e-Diner Des | ign & Marketing, Inc. | | | | |
|-------------------------|--|-------|---|-----------------------|--|
| | of corporation; must include "INCORPORATE ' "Corp," "Inc," "Co," or "Corp.") | ED, | ' "COMPANY," "CORPORATI | ON," | |
| (If name una | vailable in Florida, enter alternate corporate na | me | adopted for the purpose of transac | ting business in F | lorida) |
| 2. New York | | 3. | 061589348 | | |
| (State or co | untry under the law of which it is incorporated) | | (FEI number, if | applicable) | |
| 4. 06/29/2000 | | 5. | | | |
| (Date of incorporation) | | | (Date of duration, if oth | other than perpetual) | |
| 6. | | | | | |
| 7. <u>139 SE 6th St</u> | (SEE SECTIONS 607.1501 & 607 treet, Cape Coral, FL 33990 | 7.15 | n Florida, if prior to registration) 502, F.S., to determine penalty liab | oility) | |
| | (Current ma | ailir | ng address, if different) | 15-25 | and of the |
| 8. Name and <u>s</u> | treet address of Florida registered agent: (| P.0 | D. Box NOT acceptable) | | 10 May 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Name | Miriam O. Frawley | | | | 177 |
| Office Address | : 139 SE 6th Street | | <u></u> | P III | O |
| | Cape Coral | | , Florida <u>33990</u> | orn ∞ | |
| | (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 | |
| Chairman: Miriam O. Frawley | |
| Address: 139 SE 6th Street, Cape Coral, FL 33990 | |
| | |
| Vice Chairman: Terrence M. Frawley | |
| Address: 139 SE 6th Street, Cape Coral, FL 33990 | |
| | |
| Director: | |
| Address: | |
| | |
| Director: | |
| Address: | (22) |
| | 70 00 00 Th |
| B. OFFICERS | 10 m |
| President: Miriam O. Frawley | ma o m |
| Address: 139 SE 6th Street, Cape Coral, FL 33990 | 95 = |
| | Orm co |
| Vice President: Terrence M. Frawley | |
| Address: 139 SE 6th Street, Cape Coral, FL 33990 | |
| | M., M., |
| Secretary: Terrence M. Frawley | |
| Address: 139 SE 6th Street, Cape Coral, FL 33990 | |
| | |
| | |
| | |
| NOTE: If necessary, you may attach an addendum to the application listing addition 12 | nal officers and/or directors. |
| Signature of Director or Officer | |
| 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 | affirms that the facts stated herein |
| a third degree felony as provided for in s.817.155, F.S. | the Expandition of State constitutes |
| 13. Miriam O. Frawley | |

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of E-DINER DESIGN & MARKETING, INC. was filed on 06/29/2000, 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.

The Biennial Statement is past due.



* * *

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 29th day of April two thousand and sixteen.

Courting Sicilian

Executive Deputy Secretary of State