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SHARREN

COVER LETTER

TO: Registration Section Division of Corporations			
HAPPY HOUR INT'L INC.			
SUBJECT: Name of corporation	n - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact business."	nding" and check are submitted to register the		
Please return all correspondence concerning this matter. Thomas Law	er to the following:		
Name of	Person		
Highpoint Office Solutions Inc.			
Firm/Con	npany		
118 Baxter Street, Suite 402			
Addr	ress		
New York, NY 10013			
City/State a	and Zip code		
highpointcorp@aol.com			
E-mail address: (to be used	for future annual report notification)		
For further information concerning this matter, please	call:		
Thomas Law 212 343-2810 at ()			
Name of Person Area Coc	de Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:			
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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. HAPPY HOUR INT'L 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) 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) 5. (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 36 N.E. 1st Street, Suite 210, Miami, FL 33132 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Heather Dawson Name: 36 N.E. 1st Street, Suite 210 Office Address: Miami (City) 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. Headen Jacussar (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 Heather Dawson Chairman:				
36 N.E. 1st Street, Suite 210, Mia		,, - 11 <u> 1</u>		
ice Chairman:				
ddress:				
rector:				
Idress:	7000-24-7000-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	***************************************		
rector:				
dress:				
OFFICERS Heather Dawson		; ;		LE L-TREEF IN
36 N.E. 1st Street, Suite 210, Mia dress:		· · · · · · · · · · · · · · · · · · ·		m
			TS T	O
Yee L. Ng	,		STATE STATE STATE	
36 N.E. 1st Street, Suite 210, Mia dress:				
Heather Dawson				
retary:36 N.E. 1st Street, Suite 210, Mia	mi, FL 33132			
Yee L. Ng				
asurer:36 N.E. 1st Street, Suite 210, Mia dress:				
OTE: If necessary, you may attach ar		ting additional officers	and/or dire	ectors.
e officer or director signing this docu true and that he or she is aware that h nird degree felony as provided for in s Heather Dawson, President	ment (and who is listed in numbe false information submitted in a c	er 11 above) affirms the	at the facts	stated herein ate constitutes
	ed name and capacity of person s	igning application)		

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HAPPY HOUR INT'L INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 29, 2016, and is in good standing in this state.

OF VADA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 3, 2016.

Ballona K. Cegarske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160503-0308
You may verify this electronic certificate
online at http://www.nvsos.gov/