F16000004592

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
	☐ WAIT ☐ MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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D. SCOTT OCT 13 2016

Reft W16000067227

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: My Circles Media, Fra
Name of corporation - must include suffix
Dear Sir or Madam:
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:
(50N GOME?
Name of Person
My Circles Media, Inc.
Firm/Company
Firm/Company & & & & & & & & & & & & & & & & & & &
Fort Lawlerdale, Fl 33312
City/State and Zip code
Leon @ Mycirdes, com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
STREET/COURIED ADDRESS.
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:
S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

. - Ref# W16000067227

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. (Enter name of corporation; must include "INCORPORATED." "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) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) $\alpha m e$ (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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 daily 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.

Reft W16000067227

11. Names and business addresses of officers and/or directors:

A. DIRECTORS	5		
Chairman:	LEON GOME		
Address:	5347 56 34	Way	
	Fort Landerdel	PF1 3221)	
	5 (6.00)	7, 1	
Vice Chairman:			
Address:	-		
Director:			
Address:			
Director			···
Address:			
	 		
B. OFFICERS			
President:	LEON GOMEC		
Address:	5347 Sw 34	Wax	
	Fort Lauderdale,	FL 33317)
Vice President:			
			12 m
Address.	**************************************		福昌卫
			305 5 5
Secretary:			
Address:			
Treasurer:			- 艺术 左
Address:			
NOTE: If necess	sary, you may attach an addendum to the appli	ication listing additional officers ar	nd/or directors.
•	Signature of Directo	or or Officer	
	ector signing this document (and who is listed ne or she is aware that false information submi		
	ony as provided for in s.817.155, F.S.		_
13			<u> </u>
	(Typed or printed name and capacity o	i person signing application)	

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MYCIRCLES MEDIA, INC." 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 TWENTIETH DAY OF SEPTEMBER, A.D.

2016.





6157326 8300 SR# 20165857351 Authentication: 203022638

Date: 09-20-16