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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

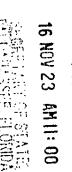
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COVER LETTER

TO:	Registration Section Division of Corporations									
SUBJ	ECT: _	Flori	da Matchmak	ers, Inc.						
			Nam	e of corpora	tion -	- mus	t include suffix			
Dear S	Sir or Mada	ım:								
"Certi	ficate of E	xistence		ate of Good	Stanc	ling"	and check are sul		isiness in Florida," ed to register the	
Please	return all	corresp	ondence conce	rning this m	atter	to the	following:			
		Valeri	A. Broadber	t						
				Name	of P	erson	1			
			 .	Firm/0	Comp	any				
		9903	Santa Monic	a Blvd., Sui	te 64	2				
				A	ddres	SS				
		Bev	erly Hills, CA	90212						
				City/Sta	te an	d Zip	code			
		valerie	@instinctmar	keting.com						
			E-mail addre	ess: (to be us	sed fo	or futi	ire annual report	notifi	cation)	
For fu	rther infor	nation o	oncerning this	matter, plea	ase ca	all:				
Valerie A. Broadbent at (214						_)	269-1702			
	Name of	f Person		Area	Code		Daytime Telep	hone	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				
Enclos	sed is a che	ck for t	he following a	mount:						
□ \$70	0.00 Filing	Fee	□ \$78.75 Fil Certificat	ing Fee & e of Status			75 Filing Fee & ified Copy	(3)	\$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.

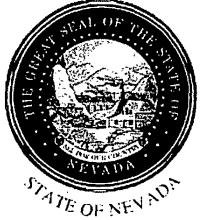
(State or country under the law of which it is incorporated) O3/13/2015 (Date of incorporation) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9903 Santa Monica Blvd., Suite 642, Beverly Hills, CA 90212 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: VCorp Services, LLC Fice Address: 5011 South State Road 7, Suite 106		able in Florida, enter alternate cornorate name add	opted for the purpose of transacting business in Florida)		
(Date of incorporation) (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) 9903 Santa Monica Blvd., Suite 642, Beverly Hills, CA 90212 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: VCorp Services, LLC fice Address: 5011 South State Road 7, Suite 106	NI\7	•			
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(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 9903 Santa Monica Blvd., Suite 642, Beverly Hills, CA 90212 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: VCorp Services, LLC fice Address: 5011 South State Road 7, Suite 106					
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(Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: VCorp Services, LLC Tice Address: 5011 South State Road 7, Suite 106					
(Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: VCorp Services, LLC ice Address: 5011 South State Road 7, Suite 106	9903 Sar				
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: VCorp Services, LLC ice Address: 5011 South State Road 7, Suite 106		(Fincipal)	office address)		
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: VCorp Services, LLC Tice Address: 5011 South State Road 7, Suite 106		(Current mailing)	address if different)		
Name: VCorp Services, LLC Tice Address: 5011 South State Road 7, Suite 106		(Carton maning	2441030, 17 011101411)		
Tice Address: 5011 South State Road 7, Suite 106	lame and stre	et address of Florida registered agent: (P.O. I	Box NOT acceptable)		
fice Address: 5011 South State Road 7, Suite 106		VCorp Services, LLC			
(c)	Name:		A STATE OF THE STA		
Davie , Florida 33314					
(Cin A)		5011 South State Road 7, Suite 106	_ - -		
(City) (Zip code) (True		5011 South State Road 7, Suite 106	, Florida		
	e Address:	5011 South State Road 7, Suite 106 Davie (City)	, Florida33314		
ing been named as registered agent and to accept service of process for the above stated corporation at mated in this application, I hereby accept the appointment as registered agent and agree to act in this c	e Address: egistered ag ing been nan	5011 South State Road 7, Suite 106 Davie (City) ent's acceptance: ned as registered agent and to accept service	of process for the above stated corporation at the		

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.

(Registered agent's signature)

11. Name	s and business addresses of officers and/or directors:	
A. DIRE	CTORS	
Chairman:		
_		_
Vice Chair	nan:	_
		_
Audress		_
Director: _	Mark Beychok	_
Address:	9903 Santa Monica Blvd., Suite 642	
	Beverly Hills, CA 90212	_
Discourses.		
	(2) 12 (2)	_
Address: _		
_		
B. OFFIC	ERS 20 20 20 20 20 20 20 20 20 20 20 20 20	
President:	Mark Beychok	
Address: _	9903 Santa Monica Blvd., Suite 642	
_	Beverly Hills, CA 90212	
Vice Presid	ent:	
Secretary:	Valerie A. Broadbent	_
Address: _	9903 Santa Monica Blvd., Suite 642, Beverly Hills, CA 90212	
Treasurer:	Mark Beychok	
Address:	9903 Santa Monica Bivd., Suite 642, Beverly Hills, CA 90212	
•	necessary, you may attach an addendum to the application listing additional officers and/or directors.	_
12.	Palitae (1) Environment of the application fishing additional officers and/or directors.	
12, <u> </u>	Signature of Director or Officer	_
are true an	or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein it that he or she is aware that false information submitted in a document to the Department of State constitute see felony as provided for in s.817.155, F.S.	
13	Valerie A. Broadbent/Secretary	_
	(Typed or printed name and capacity of person signing application)	

SECRETARY OF STATE



16 NOV 23 AM II: 00

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, FLORIDA MATCHMAKERS, 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 March 13, 2015, and is in good standing in this state.

AL OF

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on November 18, 2016.

hara K. (egeiste

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20161118-1352
You may verify this electronic certificate
online at http://www.nvsos.gov/