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(R	equestor's Name)
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(A	ddress)
(C	city/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(B	Business Entity Name)
(C	Occument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer: `
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D. BRUCE DEC 0 6 2016

COVER LETTER

	ntion Section of Corporations						
SUBJECT: _	etouch Na	me of corporation	on - mus	t include suffix			_
Dear Sir or Mad	lam:						
"Certificate of E	Application by Foreign Existence," or "Certifi d foreign corporation	cate of Good St	anding"	and check are sub			
Please return all	correspondence conc	erning this mat	ter to the	e following:			
T	om ezako	Name o	of Person	1			_
е	touches, =	Firm/Co	ompany				_
	13 Marshell Norwalk,	ll St.	dress				_
-	Norwalk,	City/State	ر کا کا and Zip	code	· · · · · · · · · · · · · · · · · · ·		_
	tom, czeko E-mail add					<u> </u>	_
For further info	E-mail add			ure annual report n	otification LAHASSI	016 DEC -5	T
Name o	Czaku of Person	at (<u>a</u> o Area Co	<u>3</u>)ode	Daytime Telepl	none Number ORIDA		
Registra Division Clifton 2661 Ex	Tr/COURIER ADDE ation Section of Corporations Building secutive Center Circle ssee, FL 32301			MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection prorations		
Enclosed is a ch	eck for the following	amount:					
□ \$70.00 Filin		filing Fee & ate of Status		.75 Filing Fee & tified Copy	\$87.50 Fi Certifica Certified	te of Statu	15 &

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. eto wclus, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
(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	husiness in Florida)
2. Defaware (855) (State or country under the law of which it is incorporated) (FEI number, if appli	icable)
4. May 24, 2010 5. persetuel (Date of incorporation) (Date of duration, if other th	
	an perpetual)
6. Tune 1 2016 (Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 13 Marshall Street, Norwalk, ct (Principal office address)	26854
(1 finospar office address)	
(Current mailing address, if different)	
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Mike Mason Name: Zeutila, Tnc. Office Address: 4407 Uneland Rd, Suite D-16-17 Orlando, FL., Florida 32811 (City) (Zip code)	2016 DEC -
Name: Zeutila, Toc.	DEC -5
Office Address: 4407 Une land Rd, Suite 13-16-17	
Orlando FL, Florida 32811 (City) (Zin code)	
(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 further agree to comply with the provisions of all statutes relative to the proper and complete	
duties, and I am familiar with and accept the obligations of my position as registered agent.	· perjormance of my

1/1-

(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: Oni Clerkwa	
Address: 13 Marshall St.	
Norwell, Ct 06854	<u> </u>
Vice Chairman: Ben Leum	
Address: 13 Marshall St.	
Norwall Ct 06854	
Director:	
Address:	
D'	
Director:	·
Address:	
P. OFFICE OF THE STATE OF THE S	
B. OFFICERS	
President: On Chukwa	
Address: 13 Marshall St.	
Address: 13 Marshall St. Norwalk, CT 06854 Vice President:	70 TAC 10
Vice President:	ARE DE T
Address:	SS S
Secretary:	CRA =
Address:	On E
Treasurer: Matthew Fish	
Address: 13 Marshall St., Norwalk, CT	06854
NOTE: If necessary, you may attach an adjendum to the application listing additional	
12.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) af are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.	firms that the facts stated herein e Department of State constitutes
13. Matthew Fish CFO a Treasure (Typed or printed name and capacity of person signing applications)	tion)

Delaware

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "ETOUCHES, 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 TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 2016.

Authentication: 203403534

Date: 11-28-16

4799738 8300

SR# 20166793125