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SECRETARY OF STATE
TALLAHASSEF FLORID.

COVER LETTER

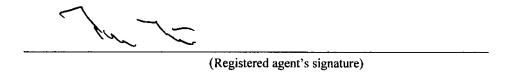
то:	Registration Se Division of Con					
SUBJ	ECT:		FARMD	ADDY I	NC.	
~~~		Name	e of corporation	on - mus	st include suffix	
Dear S	Sir or Madam:			•		
"Certi		e," or "Certifica	te of Good St	anding"	and check are sub	ct Business in Florida," omitted to register the
Please	return all corres	ondence concer	ning this mat	ter to the	e following:	
			RANDY	PORTE	₹	
	<del>,</del>		Name o	f Person	n	
			FARMDA	ADDY		
		<del>- · , ·</del>	Firm/Co	mpany		
			P,O, BOX	953023		
			Ado	iress		
			LAKE MAI	RY, FL 3	2795	
<del></del>	<u></u>		City/State	and Zig	code	
		RA	NDY@FARMI	DADDY.	СОМ	
		E-mail addre	ss: (to be used	for fut	ure annual report i	notification)
For fu	rther information	concerning this	matter, please	e call:		
	RANDY PORT	ER	at ( 407	)	310-8270	
	Name of Perso	n	Area Co	ode	Daytime Telep	hone Number
	Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	porations g Center Circle 2 32301			MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
	sed is a check for 0.00 Filing Fee	the following ar  \$78.75 Fili  Certificate	ng Fee &		.75 Filing Fee & cified 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.

INC.				
•	" "COMPANY," "CORPORATION,	<del>,</del>		
ble in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)		
OMING 3.	3. 2010-000589032 (FEI number, if applicable)			
5.				
	(Date of duration, if other the	han perpetual)		
		<del>.</del>		
·	502, F.S., to determine penalty liability	y)		
(Princi	pal office address)			
······································				
(Current maili	ng address, if different)	16 16 16		
t address of Florida registered agent: (P.	O. Box NOT acceptable)	DEC 27 RETAR		
RANDY PORTER				
203 ALMADEN COURT		OF STATE E.FLORIDA		
WINTER SPRINGS	. Florida ³²⁷⁰⁸	V01 11E		
(City)	(Zip code)			
ent's acceptance:				
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")  able in Florida, enter alternate corporate name DMING y under the law of which it is incorporated)  (Date first transacted business in (SEE SECTIONS 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 & 607.1501 &	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION, orp.," "Inc.," "Co.," or "Corp.")  Able in Florida, enter alternate corporate name adopted for the purpose of transacting of transactin		

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.



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. Nam	es and business addresses of officers and/or directors:	•	-	۵,	
A. DIRI	ECTORS				
Chairman	·				
Address:	· · · · · · · · · · · · · · · · · · ·				
Vice Chai	rman:				
Director:					
. 144 455.					
Director:					
Audiess.					
B. OFF	ICERS	····			
		TAL SE	<del>1</del> 6		
	203 ALMADEN COURT, WINTER SPRINGS, FL 32708	CRET	#	٠, ٠٠٠٠ ، ١٩٠٠	
Address:	203 ALMADEN COOKI, WHYTEK 31 KINGS, I E 32708	JAR JASS	<u>C 2</u> 7	Enterprise	
		<u> </u>	<b>&gt;</b>		
Vice Pres	ident:	— <u>————————————————————————————————————</u>	——————————————————————————————————————	Company of	
Address:		ORIDE	-	- 64011	
		<b>&gt;</b>			
Secretary:			<u>.</u>		
Address:					
Treasurer				<del></del>	
Address:		·· · · · · · · · · · · · · · · · · · ·		<u>-</u>	,
NOTE:	If necessary, you may attach an addendum to the application listing additional office	ers and/or	direct	ors.	
12	Signature of Director or Officer				
	Signature of Director or Officer				
are true a	er or director signing this document (and who is listed in number 11 above) affirms and that he or she is aware that false information submitted in a document to the Deperere felony as provided for in s.817.155, F.S.	that the ra	icts sta	ated nere	ein
13.	RANDY PORTER, PRESIDENT				

(Typed or printed name and capacity of person signing application)

## STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

### **Farmdaddy**

is a

#### **Profit Corporation**

formed or qualified under the laws of Wyoming did on **August 24, 2010**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2010-000589032**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 22nd day of November, 2016 at 2:31 PM. This certificate is assigned 021523822.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.