F170000001033

(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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17 MAR -6 AM 9: 01

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4 17 MAR -6 PM 2: 06

O SIMMONS MAR 0 7 2017 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 530490 8020289

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: March 2, 2017

ORDER TIME : 12:32 PM

ORDER NO. : 530490-005

CUSTOMER NO: 8020289

FOREIGN FILINGS

NAME: ANACRAM CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: ____

COVER LETTER

TO:	Registration Se Division of Cor					
	ANACRA	AM CORP.				
SUBJ	ECT:	Name of corne	ration -	must include suffix		
		Name of corpo	nation -	mast morade sarrix		
Dear S	Sir or Madam:					
"Certi	ficate of Existenc	ion by Foreign Corporati e," or "Certificate of Goo in corporation to transact	d Stand	ing" and check are sub		
Please	return all corresp	ondence concerning this	matter t	o the following:		
Marta	Garcia					
		Na	me of Pe	erson		
RC La	w LLP					
-		Firr	n/Comp	any		
175 S	W 7th St. Unit 1711	I	-			
-			Addres	3		
Miami	i, FL 33130					
		City/s	State and	I Zip code		
marta.	garcia@rclawllp.ne	et		•		
		E-mail address: (to be	used fo	r future annual report i	notification)	
For fu	rther information	concerning this matter, p	lease ca	II:		
Marta Garcia			ŀ	806-1350		
	Name of Perso	n at (at (ea 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		
Enclo	sed is a check for	the following amount:				
□ \$7	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Statu		\$78.75 Filing Fee & Certified 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.

	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	 		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting b	usiness in Florida)		
DELAWARE 2.	3	82-0617158			
	y under the law of which it is incorporated)	(FEI number, if applic	•		
	of incorporation)	(Date of duration, if other tha	n perpetual)		
6.					
		n Florida, if prior to registration)			
175 SW 7TH ST	R. UNIT 1711, MIAMI, FL 33130	502, F.S., to determine penalty liability)			
7. (Principal office address)					
	(Times	par office address;	negazan mayan kulun kulu		
	(Current mail	ng address, if different)	The state of the s		
			on the second		
8. Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)	سو سکت یو سو سکت یو سر کارس		
Name:	Corporation Service Company				
Name.	1201 Hays Street		7		
Office Address:					
	Tallahassee	32301 , Florida			
	(City)	(Zip code)			
Having been nan designated in this further agree to c	ent's acceptance: ned as registered agent and to accept serves application, I hereby accept the appoint comply with the provisions of all statutes familiar with and accept the obligations of	ment as registered agent and agree relative to the proper and complete	to act in this capacity. I		
C	Corporation Service Company		Lydia Cohen		
	sy: Fr	and I seemed depth of the Control of	Asst. Vice President		
		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: __ Vice Chairman: Address: Ann Dones Roqueta Director: c/ Avets, 23, Urb. Can Jordi. Address: 17181 Aiguaviva, Girnoa, SP Markus E. Rupp Director: c/ Avets, 23, Urb. Can Jordi. Address: 17181 Aiguaviva, Girona, SP **B. OFFICERS** Ana Dones Roqueta President: c/ Avets, 23, Urb. Can Jordi. Address: _ 17181 Aiguaviva, Girona, SP Vice President: Secretary: Address: _____ **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. /s/ Ana Dones Roqueta Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 13. /s/ Ana Dones Roqueta

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

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ANACRAM CORP." 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 THIRD DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANACRAM CORP."

WAS INCORPORATED ON THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202134543

Date: 03-03-17

6323443 8300 SR# 20171565550