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(Bu	siness Entity Nam	ne)
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SECRE FARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Registration Section					
	Division of Corporations					
~~	The OrganWise Guys, Inc.					
SUBJ	IECT:	e of corporatio	n _ must	include suffix		
	Inditr	e or corporatio	n - must	iliciade surrix		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Foreign of ficate of Existence," or "Certificate referenced foreign corporation to	ite of Good Sta	nding" a	and check are subt		
	return all correspondence concer McNamara	ning this matte	er to the	following:		
	-	Name of	Person			
The O	rganWise Guys, Inc.					
		Firm/Cor	npany		<u></u>	
450 Sa	tellite Blvd, NE, Suite M					
		Addı	ress	.		
Suwan	ee, GA 30024					
		City/State	and Zip	code		
sales@	organwiseguys.com	•	-			
	E-mail addre	ss: (to be used	for futu	re annual report n	otification)	
For fu	rther information concerning this	matter, please	call:			
Julie Green		800 786-1730 x2				
		_ at ()			
	Name of Person	Area Coo	de	Daytime Teleph	one Number	
	CTDEET/COUDIED ADDRE	cc.		MAILING AT	ANDECC.	
STREET/COURIER ADDRESS: Registration Section				MAILING ADDRESS: Registration Section		
Division of Corporations				Division of Corporations		
Clifton Building				P.O. Box 6327		
	2661 Executive Center Circle Tallahassee, FL 32301			Tallahassee, FI	. 32314	
Enclos	sed is a check for the following ar	nount:				
□ \$7 0	0.00 Filing Fee	_		5 Filing Fee & led 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. The OrganWise Guys Incorporated 1. (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 business in Florida) 58-2020674 Georgia 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 450 Satellite Blvd NE, Suite M, Suwanee, GA 30024 (Principal office address) (Current mailing address, if different) 8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Incorp Services, Inc. 17888 67th Court North 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. (gee attached) (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. DIRE	ECTORS Michelle Lombardo, DC			
	450 Satellite Blvd, NE, Suite M, Suwanee, GA 30024			
_	Karen McNamara			
	rman:			
	450 Satellite Blvd NE, Suite M, Suwanee GA 30024			
Director:				
Address:				
Director:		TAE E	17	
Address:		CRETA!	APR -	77
B. OFFI	CERS	SEE. FI	7 ⊋	
President:		22 22	÷	<u> </u>
		P	<u>ಹ</u>	
Vice Presid	dent:			
Address: _				
Secretary:				
Address: _				
Treasurer:				
Address: _				
NOTE: 12.	ff necessary, you may attach an addendum to the application listing additional officers and/o	or direc	etors.	
are true an a third de	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the nd that he or she is aware that false information submitted in a document to the Department gree felony as provided for in s.817.155, F.S. a McNamara			



3773 Howard Hughes Parkway Suite 500S Las Vegas, NV 89169

Phone 702.866.2500 Toll-Free 800.2.INCORP (1-800-246-2677) Fax 702.866.2689

www.incorp.com

April 11, 2017

Corporations Division

Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To Whom It May Concern:

InCorp Services, Inc., an authorized Corporate Registered Agent in Florida, whose office is located at 17888 67th Court North, Loxahatchee, FL 33470, herein consents to act as Registered Agent for **The OrganWise Guys Inc.** for purposes and services only related to the Florida Department of State.

If you have any questions, please contact me at (800) 246-2677 Monday-Friday from 8:00 a.m. to 5:00 p.m. PST.

Sincerely,

InCorp Services, Inc.

Leora Nealey, Processor on behalf of InCorp Services, Inc.

leora.nealey@incorp.com

TILED

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SECRETARY OF STATE

Control Number: K300856

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

THE ORGANWISE GUYS INCORPORATED

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number Date Inc/Auth/Filed Jurisdiction Print Date : 14469185 : 01/04/1993 : Georgia : 04/11/2017





Brian P. Kemp Secretary of State