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(Re	questor's Name)							
(Ad	dress)							
(Ad	dress)							
(City/State/Zip/Phone #)								
PICK-UP	WAIT MAIL							
(Bu	siness Entity Name)							
(Do	cument Number)							
Cartified Copies	Certificates of Status							
Certified Copies								
Special Instructions to	Filing Officer:							
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SECRETARY OF STATE
SHANSSEE, FLORID

COVER LETTER

TO:	Registration Section Division of Corporations			
SUB.	JECT: ALOHA GROUP IN	C.		
			on - must include suffi	ix
Dear S	Sir or Madam:			
"Certi	nclosed "Application by For ficate of Existence," or "Ce referenced foreign corporat	rtificate of Good St	anding" and check are	ansact Business in Florida," e submitted to register the
Please	return all correspondence of	concerning this mat	ter to the following:	
Sacha	Sam			
		Name o	of Person	
Aloha	Group Inc.			
		Firm/Co	ompany	· · · · · · · · · · · · · · · · · · ·
1825 I	Riverview Drive			
		Ado	iress	
Melbo	ourne, FL 32901			
		City/State	and Zip code	
sacha	@alohagroupus.com			
	E-mail	address: (to be use	for future annual rep	ort notification)
For fu	rther information concernin	g this matter, please	e call:	
Sacha Sam		at (³²¹	639-6000 ext. 211	
	Name of Person	Area Co	ode Daytime T	elephone Number
	STREET/COURIER AI Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301		Registration of P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314
Enclos	sed is a check for the follow	ing amount:		
5 7		75 Filing Fee & ificate of Status	□ \$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.

1.	Aloha Group Inc	с.					
		orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,'	' "COMPANY," "CORPORATION,"	,	•	
	Aloha Group Us	SInc.					
	(If name unavaila	able in Florida, enter alternate corporate nar	ne	adopted for the purpose of transacting b	usiness in Florid	a)	
2.	Delaware		3.	81-5124852			
	(State or country under the law of which it is incorporated))	(FEI number, if applicable)			
4.	04/12/2017		5.	N/A			
	(Date	(Date of incorporation)		(Date of duration, if other than perpetual)			
6.	N/A						
	241 Dayon Cirola	(SEE SECTIONS 607.1501 & 60°		n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7.		Wyoming, DE 19934 (Prin	ncij	pal office address)		_	
	1825 Riverview	Drive Melbourne, FL 32901					
		(Current ma	aili	ng address, if different)	SECR	17 H	
8.	Name and stree	et address of Florida registered agent: ((P.C	D. Box NOT acceptable)		MAY -I	T
	Name:	Sacha Sam			<u> </u>		FILED
o	ffice Address:	1825 Riverview Drive			FEO.	PH 12: 56	
	Melbourne		, Florida ³²⁹⁰¹	AGE AGE	256		
		(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 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.

(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: _____ Address: ____ Vice Chairman: __ Address: _ Director: Address: Director: _ Address: __ **B. OFFICERS** President: Ishmael Vila-Lobos Address: 1825 Riverview Drive Melbourne, FL 32901 Vice President: Address: Secretary: _ Address: _ Treasurer:

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 \$.817.155, F.S.

13. Ishmael Villa-Lobos

Address:

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ALOHA GROUP 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-FOURTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALOHA GROUP INC." WAS INCORPORATED ON THE TWELFTH DAY OF APRIL, A.D. 2017.

Authentication: 202415138

Date: 04-24-17

6295609 8300N SR# 20172491633