## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001324293)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850) 617-6383

From:

Addount Name : COGENCY GLOBAL, INC.

Account Number : 120000000088

Pax Number

Phone : (800)221~0102 : (800)944-5607

\*\*Friter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please ##

Email Address:\_\_\_\_

## FOREIGN PROFIT/NONPROFIT CORPORATION THE OLIVE LAB INC.

Certificate of Status	()
Certified Copy	1
Page Count	04
Estimated Charge	\$78,75

MAY 1 6 2017

Electronic Filing Menu Corporate Filing Menu

Y SUEKER

From:

05/15/2017 13:07 #435 P.002/005

(((H17000132429 3)))

		COVER LI	ETTER		
TO: Registratio					
Division o	f Corporations				
SUBJECT:		The O	live Lab Inc.		
*****	Name	of corporation	- must include suffix		
Dear Sir or Madam	ı:				
"Certificate of Exis	dication by Foreign C stence," or "Certificat preign corporation to	e of Good Stand	ling" and check are sul	nct Business in Florida," braitted to register the	
Please return all co	rrespondence concerr	ning this matter	to the following:		
		Bo Dybi	oro		
CONTRACTOR OF STREET, STREET, ST.	and the second seco	Name of P			
		Bukkehave (	Offices		
		Firm/Comp	any		
	185	0 Eller Drive	, Suite 402		
the first of the first on a sum or management of the first of the firs		Addres	S		
	For	t Lauderdale	, FL 33316		
	of the first specific control of the second	City/State and	l Zip code		
	b	dy@bukkeha	ive.com		
	E-mail address	s: (to be used fo	r future annual report r	notification)	
For further informa-	tion concerning this n	natter, please ca	lf:		
Bo D	ybbro	at ( 954	525-9	525-9788	
Name of Pe	<del></del>	Area Code	Daytime Telepl		
STREET/COURIER ADDRESS; Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration Services Division of Co P.O. Box 6327	MAILING ADDRESS; Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check	for the following amo	ount:			
["] \$70.00 Filing Fe	e [] \$78.75 Filing Certificate o		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

(((H170001324293)))

## 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,	The Oil	ve Lal	b Inc.	
	of corporation; must include "INCORPORAT" "Corp." "Inc." "Co," ar "Corp.")	ED," "(	COMPANY," "CORPORATIO	N,"
(If name una	vallable in Florida, enter alternate corporate ne	inte adoj	pted for the purpose of transacti	ng business in Plorida)
2.	Delaware	3.	82-074604	<b>1</b> 1
(State or co	untry under the law of which it is incorporated	)	(FEI number, if applicable)	
4	February 7, 2017	5.		
(1	Date of incorporation)		(Date of duration, if other than perpetual)	
6.				
7. Bu	(SEE SECTIONS 607.1501 & 60 ukkehave Offices, 1850 Eller Drive	7.1502, Suite		• •
	(Current m	ailing ad	ddress, if different)	
8. Name and 8	treet address of Florida registered agent:	P.O. B	ox NOT acceptable)	\$0.50 00.5 00.5 00.5
Name	Cogeny Global Inc.		···	
Office Address	115 North Calhoun Street, S	uite 4	<u>L</u>	
			, Florida 32301	S
	(Ciry)		(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 delly 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.

(((H17000132429 3)))

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman: Morten Ravn Frederiksen	
Address: Bukkehave Offices, 1850 Eller Drive, Suite 402, Fort Lauderd	
Vice Chairman:	
Address:	
Director: Bo Thomas Dybbro	
Address: Bukkehave Offices, 1850 Eller Drive, Suite 402, Fort Lauderda	
Director:	
Address:	
B. OFFICERS	3
Christian Haar	(0) (n) (n) (n)
Address: Bukkehave Offices, 1850 Eller Drive, Suite 402, Fort Lauderda	ile, FL 33316
Vice President: Marcelo Kuzuhara	
Address: Bukkehave Offices, 1850 Elier Drive, Sulte 402, Fort Lauderda	
Address:	
Managia M	
Address: Bukkehave Offices, 1850 Eller Drive, Suite 402, Fort Lauderda	
Treasurer: Bo Dybbro	
Address: Bulkehave Offices, 1850 Eller Drive, Suite 402, Fort Lauderda	IA FI 33316
NOTE: If necessary, you may attach an addendum to the application listing additional 12.	officers and/or directors.
Signature of Director or Officer  The afficer 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 th a third degree felony as provided for in s.817.155, F.S.	
13. Marcolo Kukuhara - Vice President	
(Typed or printed name and canacity of person signing applica-	tion)

(((H17000132429 3)))



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE OLIVE LAB 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 FIFTEENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE OLIVE LAB INC." WAS INCORPORATED ON THE SEVENTH DAY OF FEBRUARY, A.D. 2017.

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

6309442 8300 SR# 20173497893

You may verify this certificate online at corp.delaware gov/authver.shtml

Authentication: 202538339

Date: 05-15-17