# 71000002273

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

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SECRETARY OF STATE

O SIMMONS MAY 1 9 2017





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088 May 18, 2017 Date:\_\_ Name: Marisa Kugelmann J001304 Reference #:\_\_\_\_\_ SITEHANDS, INC. Entity Name:\_\_\_\_ ✓ Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent Reinstatement Conversion Merger ☐ Dissolution/Withdrawal Fictitous Name Other Authorized Amount: \$\mathfrak{T} \cdot \cd

#### **COVER LETTER**

TO: Registration Sect Division of Corpo				
SUBJECT:				
. —	Name of corp	oration - mus	t include suffix	
Dear Sir or Madam:				
The enclosed "Applicatio "Certificate of Existence, above referenced foreign	or "Certificate of Go	od Standing"	and check are sub-	
Please return all correspon	ndence concerning this	s matter to the	following:	·
	Lake	sha Johnso	on	
	Na	ame of Person	)	-
•	Coger	ncy Global I	nc.	
	Fir	m/Company		
,	1601 Eli	m St. Suite	4360	
		Address		
	Dalla	as, TX 7520	1	
•	City/	State and Zip	code	-
	_	stechnology		
	E-mail address: (to be	e used for futi	ure annual report n	otification)
For further information co	oncerning this matter, p	please call:		
Lakesha Johr	nson at (	518	213-07	<b>'</b> 65
Name of Person		ea Code	Daytime Teleph	one 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	
Enclosed is a check for the	e following amount:			
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Statu		75 Filing Fee & ified Copy	S87.50 Filing Fee, Certificate of Status of 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,"	
"Inc," "Co," or "Corp.")	,	
n Florida, enter alternate corporate name ado	pted for the purpose of transacting business in I	Florida)
Delaware 3		
er the law of which it is incorporated)	(FEI number, if applicable)	
11/29/2016		
corporation)	(Date of duration, if other than perpetual	)
		h
(Date first transacted business in Fl	orida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		معندر شدند
15720 Brixham Hill Avenue, Suite 525 Charlotte, NC 28277		ـــر. دع
(Principal o	office address)	~~~
1 Penn Plaza, Suite 5405 N	ew York, NY 10119	<u> </u>
(Current mailing a	ddress, if different)	 ارن سند
		<i>**</i> **********************************
iress of Florida registered agent: (P.O. E	Box NOT acceptable)	
COGENCY GLOBAL INC.	_	
115 North Calhoun Street, Suite 4		
	, Florida	
Tallahassee (City)	, Florida <u>32301</u> (Zip code)	
Tallahassee (City) acceptance:		n at the plac
Tallahassee (City) acceptance: s registered agent and to accept service lication, I hereby accept the appointmen	of process for the above stated corporation It as registered agent and agree to act in ti	his capacity.
Tallahassee (City)  acceptance: s registered agent and to accept service lication, I hereby accept the appointment by with the provisions of all statutes rela	of process for the above stated corporation It as registered agent and agree to act in the Itive to the proper and complete performan	his capacity.
Tallahassee (City) acceptance: s registered agent and to accept service lication, I hereby accept the appointmen	of process for the above stated corporation It as registered agent and agree to act in the Itive to the proper and complete performan	his capacity.
Tallahassee (City)  acceptance: s registered agent and to accept service lication, I hereby accept the appointment by with the provisions of all statutes rela	of process for the above stated corporation It as registered agent and agree to act in the Itive to the proper and complete performan	his capacity.
Tallahassee (City)  acceptance: s registered agent and to accept service lication, I hereby accept the appointment by with the provisions of all statutes rela	of process for the above stated corporation It as registered agent and agree to act in the Itive to the proper and complete performan	his capacity.
	Delaware  der the law of which it is incorporated)  11/29/2016  (Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502  15720 Brixham Hill Avenue, Suite  (Principal of the Plaza, Suite 5405 N)  (Current mailing and dress of Florida registered agent: (P.O. E	(Date of duration, if other than perpetual  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  15720 Brixham Hill Avenue, Suite 525 Charlotte, NC 28277  (Principal office address)  1 Penn Plaza, Suite 5405 New York, NY 10119  (Current mailing address, if different)

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	Please see attached for additional officers and directors
Chairman:	· · · · · · · · · · · · · · · · · · ·
Vice Chairman:	
Address:	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
Director:	Richard Liu
Address:	1 Penn Plaza, Suite 5405 New York, NY 10119
Director:	Bradford Bernstein
Address:	1 Penn Plaza, Suite 5405 New York, NY 10119
	The second secon
B. OFFICERS	CH CH
President:	John P. Rosato
Address:	1 Penn Plaza, Suite 5405 New York, NY 10119
·	
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
NOTE: If necessa	ry, you may attach an addendum to the application listing additional officers and/or directors.
12	/s/ Frank Favia
The officer or direc	Signature of Director or Officer stor 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 by as provided for in s.817.155, F.S.
13	Frank Favia - CFO
	(Typed or printed name and capacity of person signing application)

#### Additional Officers and Directors:

#### Officer:

Favia Frank - CFO 1 Penn Plaza, Suite 5405 New York NEW YORK 10119

#### **Directors:**

Rosato John P. 1 Penn Plaza, Suite 5405 New York NEW YORK 10119

Blackham Veronica 1 Penn Plaza, Suite 5405 New York NEW YORK 10119

Leibowitz Lawrence 1 Penn Plaza, Suite 5405 New York NEW YORK 10119

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SITEHANDS, 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 SEVENTEENTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SITEHANDS, INC."

WAS INCORPORATED ON THE TWENTY-NINTH DAY OF NOVEMBER, A.D. 2016.

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

Authentication: 202553410

Date: 05-17-17

6149154 8300 SR# 20173630727