(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·			
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(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
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Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				

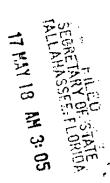
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### **COVER LETTER**

TO:	Registration Section Division of Corporations				
	SUNWARD TOURS INC.				
SUBJ		corporation -	must include suffix		
Dear S	ir or Madam:				
"Certif	closed "Application by Foreign Corpicate of Existence," or "Certificate or referenced foreign corporation to trans	f Good Stand	ing" and check are subi		••
Please	return all correspondence concerning	g this matter t	o the following:		
Michae	el M. Darby				
		Name of Po	erson		
SUNW	ARD TOURS INC.			•	ALLAHASSELT 3: 05
		Firm/Comp	any		7 15
7980 N	. ATLANTIC AVENUE SUITE 210				יה עם יי
		Addres	S		: <del>تخ</del> دن
CAPE	CANAVERAL FL 32920				9.05
	· <del>-</del>	City/State and	l Zip code		
sdarby(	@mlscorporation.com				
	E-mail address:	(to be used fo	r future annual report n	otification)	
For fur	ther information concerning this ma	tter, please ca	11:		
Denis	e McArthur	321 t (	613-4626		
	Name of Person	Area Code	Daytime Teleph	none 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			
Enclos	ed is a check for the following amou	nt:			
<b>□</b> \$70	0.00 Filing Fee \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fe Certificate of St 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. SUNWARD TOURS INC. 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) 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) January 12, 2016 Perpetual (Date of duration, if other than perpetual) (Date of incorporation) April 12, 2017 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7980 N. Atlantic Avenue Suite 210 Cape Canaveral, FL 32920 (Principal office address) 7980 N. Atlantic Avenue Suite 210 Cape Canaveral, FL 32920 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Patrick Schneider Name: 7980 N. Atlantic Avenue Suite 210 Office Address: Cape Canaveral , Florida (City)

### 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. DIR	CCTORS	
Chairman		_
Address:		_
		_
Vice Chai	man:	_
Address:		_
Director:	Frank Rafaraci	_
Address:	313/16 ST, Flat 307, Al Hamriya	_
	Dubai 00000 AE	_
Director:	Michael M. Darby	_
Address:	164 Farmington Road	 !.
	Longmeadow, MA 01106	۲ 1
B. OFF	CERS ©	79
President:	Frank Rafaraci 313/16 ST, Flat 307, Al Hamriya	ب ب
Address:	313/16 ST, Flat 307, Al Hamriya	73
	Dubai 00000 AE	_
Vice Pres	Michael M. Darby	_
Address:	164 Farmington Road	_
7100,055.	Longmeadow, MA 01106	_
Secretary	See addendum for additional officer and director.	_
Address:		_
Treasurer		_
Address:		_
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
12	Signature of Director or Officer	_
are true a 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 facts stated herein nd that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S. on Idone, Exec Vice President/Director	_
-	(Typed or printed name and capacity of person signing application)	_



7980 N. Atlantic Ave. # 210 Cape Canaveral, FL 32920 Office (321) 453-0704 Fax (321) 453-0537

## Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida

Corporation Name:

SUNWARD TOURS INC.

FEI Number:

81-1271144

Section 11: Additional Officer and Director

### A. DIRECTORS

Director: <u>Jason Idone</u>

Address: 354 Coral Drive Cape Canaveral, FL 32920

### **B. OFFICERS**

Vice President: <u>Jason Idone</u>

Address: 354 Coral Drive Cape Canaveral, FL 32920

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SUNWARD TOURS 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 NINTH DAY OF MAY, A.D. 2017.

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





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SR# 20173281832

Authentication: 202512493

Date: 05-09-17