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DIKISION OF CORPORATIONS

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COVER LETTER

TO:	Registration Section							
	Division of Corporations	·						
	PETREXX INC.							
SUBJ	ECT:	6						
	Nam	e of corporatio	n - mus	st include suffix				
Dear S	Sir or Madam:							
"Certi	nclosed "Application by Foreign ficate of Existence," or "Certificate referenced foreign corporation to	ate of Good Sta	inding"	and check are sub				
	return all correspondence conce AEL J. KIRWIN	rning this matte	er to the	e following:				
		Name of	`Perso					
KIRW	IN NORRIS, P.A.			•				
-		Firm/Co	npany					
15 W.	CHURCH STREET, SUITE 301							
		Add	roce		,			
ORLA	NDO, FL 32801	Add	1033					
		City/State	and Zip	code				
mjk@l	kirwinnorris.com							
	E-mail addr	ess: (to be used	for fut	ure annual report i	notification)			
For fu	rther information concerning this	s matter, please	call:					
Micha	Michael J. Kirwin 407 740-6600		0-6600					
		at (
	Name of Person	Area Co	de	Daytime Telep	hone Number			
	STREET/COURIER ADDR	ESS:		MAILING A	DDRESS:			
Registration Section			Registration Section					
Division of Corporations			Division of Corporations					
Clifton Building			P.O. Box 6327					
	2661 Executive Center Circle Tallahassee, FL 32301			Tallahassee, F	L 32314			
Enclo	sed is a check for the following a	mount:						
□ \$7	0.00 Filing Fee \$78.75 Fi	ling Fee & e of Status		.75 Filing Fee & tified 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. PETREXX INC. (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) 82-2085546 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) July 14, 2016 Perpetual (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 21301 Powerline Road, Suite 106, Boca Raton, Florida 33433 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Kirwin Norris, P.A. Name: 15 W. Church Street, Suite 301 Office Address: Orlando (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. DIRECTORS Anthony van der Merwe Chairman: 21301 Powerline Road, Suite 106, Boca Raton, FL 33433 Address: ___ Vice Chairman: Address: _____ Director: **B. OFFICERS** Anthony van der Merwe President: 21301 Powerline Road, Suite 106, Boca Raton, FL 33433 Address: __ Vice President: Address: Anthony van der Merwe Secretary: 21301 Powerline Road, Suite 106, Boca Raton, FL 33433 Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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 s.817.155, F.S. Anthony van der Merwe 13. _____

Page 1

Delaware

The First State

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

DELAWARE, DO HEREBY CERTIFY "PETREXX 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 SEVENTH DAY OF JULY, 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 "PETREXX INC."

WAS INCORPORATED ON THE FOURTEENTH DAY OF JULY, A.D. 2016.

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

6096430 8300 SR# 20175122384

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

Antivery W. Badlerik, Securetary of Blatte)

Authentication: 202841656

Date: 07-07-17