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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

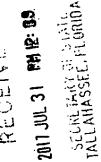
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION PTN MANAGEMENT LTD. INC.



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1. HARRIE

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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.

	ENT LTO INC.			
	orporation; must include "INCORPORATED," orp," "Inc," "Co." or "Corp.")	"COMPANY," "CORPORATION,"		
				
(If name unavaila	ble in Florida, enter alternate corporate name a	dopted for the purpose of transacting busi	ness in Florid	la)
2. BERMUDA		N/A 1		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicab	de)	
4 07/21/17	5.			
(Date	of incorporation)	(Date of duration, if other than p	perpetual)	
6. N/A				
<u></u>	(Date first transacted business in			
	\	02, F.S., to determine penalty liability)		
7. 7183 NW 123RD	AVE, PARKLAND, FL 30076			
	(Principa	al office address)	3-00	<u>ာ</u>
		10 P.O.		<u> </u>
	(Current matting	g address, if different)	7117.75 7117.75	
5 N	. Many of Physide assistant and events (B.C.) Par NOT accentable)	- (m2) - 인 연합. =	ა წლი≭ —
8. Name and sired	address of Florida registered agent: (P.C	Box NOT acceptance)		رالمعلق الم
Name:	Northwest Registered Agent, LLC.			
Office Address:	3030 N. Rocky Point Dr. STE 150A		- 新刊 F - 1512 P	
Office Francis.			- \$1 - 4	-
	Tampa	, Florida <u>33607</u> (Zip code)		
	(City)	(Zifi code)		
	ent's acceptance:			
Having been nan	ted as registered agent and to accept servi- application, I hereby accept the appointn	ce of process for the above stated cor next as registered agent and agree to	rporation at oct in this c	the place ranacity.
further agree to c	omply with the provisions of all statutes r	elative to the proper and complete pe	rformance	of my
duties, and I am	familiar with and accept the obligations of	f my position as registered agent.		

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director: CARSTEN KLEIN	
Address: 7183 NW 123RD AVE, PARKLAND, FL 30076	
Director:	
Address:	
B. OFFICERS	2017 JU SLUAN TALLAN
President: CARSTEN KLEIN	
Address: 7183 NW 123RD AVE, PARKLAND, FL 30076	(γ _i) ω γ
	77 <u>3</u> 77
Vice President:	
Address:	
Secretary: CARSTEN KLEIN	
Address: 7183 NW 123RD AVE, PARKLAND, FL 30076	
Treusurer: CARSTEN KLEIN	
Address: 7183 NW 123RD AVE, PARKLAND, FL 30076	
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 1 are true and that he or she is aware that false information submitted in a doc a third degree felony as provided for in s.817.155, F.S.	I above) affirms that the facts stated herein ument to the Department of State constitute
13. CARSTEN KLEIN, PRESIDENT	

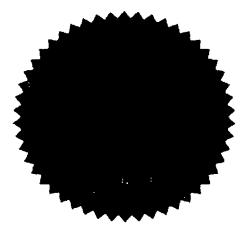


BERMUDA MINISTRY OF ECONOMIC DEVELOPMENT CERTIFICATE OF COMPLIANCE

I, Nicole Iris, **Deputizing Supervisor of Registration**, of the Registrar of Companies, in the Islands of Bermuda, do hereby certify that

PTN Management Ltd.

is a Company duly incorporated under the laws of Bermuda and is, at the date of this Certificate, in good standing, under the Companies Act 1981.



Given under my hand and the Seal of the REGISTRAR OF COMPANIES this 21st day of July 2017

Deputizing Supervisor of Registration