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SECRETARY OF STATE
ALLAHASSEE, FI ORIGINA

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COVER LETTER

TO: Registration Section				
Division of Corporations				
Square Domain, Inc.				
SUBJECT: Name	of corporation -	must include suffix		
Traine !	or corporation	max menade on m		
Dear Sir or Madam:				
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to t	of Good Stand	ing" and check are st		
Please return all correspondence concern Sonia Laflamme	ing this matter t	o the following:		
	Name of Po	erson		
Square Domain, Inc.				
	Firm/Comp	any	· · · · -	
8008 Terrace Arbor Ct				
	Addres	· · · · · · · · · · · · · · · · · · ·		
Tampa, FL 33637	Addies	•		
	City/State and	ł Zip code		
sonia@squaredomain.com			=	
E-mail address	s: (to be used fo	r future annual report	notification)	
For further information concerning this n	natter, please ca	H:	notification: July	Ī
Sonia Laflamme	214 at (282-4336	27 F SSEE. I	FILE
Name of Person	Area Code	Daytime Tele	phone Sumber 72	O'4
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Tallahassee, FL 32301				
Enclosed is a check for the following amo	ount:			
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filir Certificate Certified C	of Status &

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. Square Domain, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "lnc.," "Co.." "Corp." "lnc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 47-1293818 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) June 27, 2014 (Date of duration, if other than perpetual) (Date of incorporation) 06-01-2017 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 8008 Temple Arbor Ct., Tampa, FL 336637 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Sonia Laffamme Name: 8008 Terrace Arbor Ct. Office Address: Tampa (City) (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.

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 Sonia Laflamme Chairman: 8008 Terrace Arbor Ct, Tampa FL 33637 Address: ____ Vice Chairman: Address: Director: _ Address: ___ **B. OFFICERS** President: Address: Vice President: Address: __ _ _ _ _ Secretary: __ Address: ____ Treasurer: Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Hume 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.

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Square Domain, Inc. (file number 802017769), a Domestic For-Profit Corporation, was filed in this office on June 27, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 27, 2017.





Rolando B. Pablos Secretary of State

Dial: 7-1-1 for Relay Services

Document: 746854980004