# F17000004510

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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S. WARREN 0CT 0 9 2017 CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 838333 8146538

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: September 27, 2017

ORDER TIME : 1:05 PM

ORDER NO. : 838333-002

CUSTOMER NO: 8146538

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#### FOREIGN FILINGS

NAME: BORGE MEDIA GROUP INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: \_\_\_\_

#### **COVER LETTER**

TO: New Filing Division o	g Section f Corporations			
SUBJECT: Borg	ge Media Group Inc.			
	Name of corpo	ration - must include suffix		
Dear Sir or Madan	1:			
"Certificate of Exi	olication by Foreign Corporation stence," or "Certificate of Good oreign corporation to transact by	d Standing" and check are sub-		
Please return all co	orrespondence concerning this i	matter to the following:		
Paul Borgese				
	Nan	ne of Person	<del> </del>	
	Firm	ı/Company	_	
5852 South Pecos	Road, Suite 7			
		Address		
Las Vegas, NV, U	S, 89120			
	•	tate and Zip code		
borgemediagroup(				
	E-mail address: (14) be	used for future annual report n	otification)	
For further informa	ation concerning this matter, pl	ease call:		
Name of I	at (	) Area Code & Daytime Telepho	ana Numbar	
Name of t	Cison	Area Code & Daytime Telephic	one indiribei	
STREET/COURIER ADDRESS: New Filing Section			MAILING ADDRESS: New Filing Section	
	Division of Corporations  Clifton Building  Division of Corporations  P.O. Box 6327			
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314			
Tallahasse	e, FL 32301			
Enclosed is a check	k for the following amount:			
□ \$70.00 Filing F	ee	☐ \$78.75 Filing Fee & Certified 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.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATI	ON,"
(If name unavail:	able in Florida, enter alternate corporate name	adopted for the purpose of transac	ting business in Florida)
Nevada	3		
(State or country under the law of which it is incorporated)		(FEI number, if	applicable)
07.24.2047		Perpetual	
$\frac{O7-31-2017}{\text{(Date of incorporation)}} 5. \frac{P6}{\text{(D}}$		(Duration: Year corp. will cease to exist or "perpetual")	
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration)	bility)
555 Painted Mir	age Road,Suite 320, Las Vegas,NV , 89	• •	; <i>1</i>
	(Principal office add		
555 Painted Min	rage Road, Suite 320, Las Vegas, NV, US		
	(Current mailing add		
	, and the second second		<b>17</b>
Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	<u>-</u> 8
Name:	Corporation Service Company		1988 1993 1993 1993
	1201 Hays Street	<del></del>	
ffice Address:	Tallahassee	32301 Florida	AM II: 20 of State e. Florid.
	(City)	(Zip code)	¥m o
aving been namesignated in this orther agree to cuties, and I am f	ent's acceptance:  ned as registered agent and to accept serve application, I hereby accept the appoint comply with the provisions of all statutes familiar with and accept the obligations Corporation Service Company	ment as registered agent and a relative to the proper and compof my position as registered ag	igree to act in this capac plete performance of my
[,	By:	<del></del>	

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 Chairman: PAUL BORGESE Address: \_ 555 PAINTED MIRAGE ROAD SUITE 320 LAS VEGAS, NV 89149 Vice Chairman: Address: Director: Address: **B. OFFICERS** President: Address: \_\_\_\_ Vice President: Address: \_\_\_\_\_ Secretary: Address: Treasurer: NOTE: If necessary, you may attach an addendum to the supplication listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 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. Paul Borgese

(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **BORGE MEDIA GROUP INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 31, 2017, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 6, 2017.

Ballona K. Cegevske

Barbara K. Cegavske Secretary of State

Electronic Certificate
Certificate Number: C20171006-0084
You may verify this electronic certificate
online at http://www.nvsos.gov/