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	page. Doing so will generate another cover sheet.	<u> </u>
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To:		***
	Division of Corporations	
	Fax Number : (850)617-6383	•
From:		
	Account Name : VCORP SERVICES, LLC	6 70
	Account Number : I20080000057	. .

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

Email	Address:	
	•	1 **

FOREIGN PROFIT/NONPROFIT CORPORATION

Top Knot Inc

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

OCT OF 2017 J. HARRIS

2017 OCT

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.

Special Situation				_	
•	able in Florida, enter alternate corporate name i	adopted for the purpose of transacting busine	ss in Florida)		
Nevis	3.	(FEI number, if applicable		_	
(State or count) 9/22/2017	•				
(Date	of incorporation)	(Date of duration, if other than per	perual)	-	
•	•				
6	(Date first transacted business in (SEE SUCTIONS 607.1501 & 607.15	n Florida, if prior to registration's 502, F.S., to determine penalty liability)		••	
_ 4230 S M.cDill .	Avenue, Suite 2, Tampa, FL 33611		_	_	
	(Princip	nal office address))	2017 (£3 ·
	(Current mailir	ng address, if differenty		-E	eş e pa
8. Name and <u>stre</u> Name:	Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Vecup Services, LLC				
Office Address:	5011 South State Road 7, Suite 106		ن	12: 27	
		, Florida	ī.	_	
	(City)	(Zip code)			
Having been nan designated in this further agree to s	cut's acceptuace: ned as registered agent and to accept serve s application, I hereby accept the appoints comply with the provisions of all statutes t familiar with and accept the obligations of	ment as registered agent and agree to a relative to the proper and complete perf	ct in this cap	Mcity.	1

^{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	.eg
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director.	
Address:	
B. OFFICERS	
President	
Address:	** ~
	7 0 54
Vice President:	47300
Address:	Or (
, , , , , , , , , , , , , , , , , , ,	
Reinhardt Lange Secretary:	е. г. ш. г.
Address, 1000 Lafayette Blyd; Bridgeport, Connecticut 0560	
Address:	
Address:	
NOTE: If necessary, you may again an addendum to the applica	ation listing additional officers and/or directors
1922 - 40	attor fishing additional officers and or directors.
Signature of Director	
The officer or director signing this document (and who is listed in are true and that he or she is aware that false information submitt a third degree felony as provided for in s.817.155, F.S.	in number 11 above) affirms that the facts stated herein ted in a document to the Department of State constitutes
Reinhardt Lange, Secretary	~
(Typed or printed name and capacity of	person signing application)

ISLAND OF NEVIS OFFICE OF THE REGISTRAR OF CORPORATIONS

CERTIFICATE OF GOOD STANDING

I HEREBY CERTIFY that

Top Knot Inc

en.

Was duly incorporated and existence commenced under the provisions of the Nevis Business Corporation Ordinance 1984, as amended, on

22nd September, 2017

I FURTHER CERTIFY that according to the records of this office the said corporation is in Good Standing and has a legal corporate existence as at the date below-shown.

Given under my Hand & Seal at Charlestown This 03rd day of October, 2017

Registrar of Gerporations

NO. C 48726

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