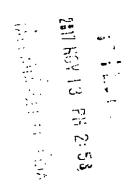
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J. HARRIS

COVER LETTER

TO:	Registration of							
SHRI	ECT:	Roy	itran	Γνα.				
ODO		1-24	Tran, Name of	corporation	on - must inc	lude suffix		
Dear S	ir or Madar							
"Certi	ficate of Exi	stence," o	by Foreign Corp or "Certificate o rporation to trai	f Good St	tanding" and	check are sul		iness in Florida," I to register the
Please	return all co	orrespond	ence concerning	g this mat	ter to the fol	lowing:		
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	 	Γ.	-mail address: (to be used	d for future a	innual report	notific	ation)
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1	Name of	Person	<u>, , , , , , , , , , , , , , , , , , , </u>	Area Co	ode E	Daytime Telep	ohone i	Number
	Registration		ER ADDRESS:			MAILING A Registration S		
	Division o	f Corpora				Division of C	orpora	
	Clifton Bu 2661 Exec		iter Circle			P.O. Box 632 Fallahassee, I		Na.
	Tallahasse					rananassee, i	/ 2.	, , , ,
Enclos	ed is a chec	k for the	following amou	nt:				
ÌS (\$70).00 Filing F	Pee □	\$78.75 Filing I Certificate of		☐ \$78.75 F Certified	_		\$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.

"Inc.," "Co.," "Corp." "Inc." "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of trans	sacting business in Florida)
2. Delaware 3. 82-292763	0
(State or country under the law of which it is incorporated) (FEI number,	if applicable)
4. 9/22/2017 5.	
(Date of incorporation) (Date of duration, if	other than perpetual)
6	
(Date first transacted business in Florida, if prior to registration (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty l	iability)
	iability)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty l	iability) L 32653
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty 7. 6804 NW 52nd Lane Gainesville F (Principal office address)	iability)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty I 7. 6864 NW 52 nd Lane Gamesville F (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Robert K. Ranum	iability) L 32653
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty I 7. OSOH NW 52 Ad Lane Gainesville F (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	iability) L 32653

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 FL 32653 Address: B. OFFICERS CEO Robert K. Ranum chief scientific officer: Laura P.W. Panym Address: Ste above Secretary: _____ Address: _____ Address: ____ **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. obut kitam 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. 13. _____

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



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

DELAWARE, DO HEREBY CERTIFY "RANTRAN, 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 THIRTEENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RANTRAN, INC."

WAS INCORPORATED ON THE TWENTY-SECOND DAY OF SEPTEMBER, A.D. 2017.

The state of the s

Authentication: 203396881

Date: 10-13-17