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COVER LETTER

| | Registration Se Division of Cor | | | | |
|---|---|---|--------------|---|--|
| SUBJEC | CT: | MA | CKAGE S | OHO INC. | |
| | | Name of corpora | tion - mus | t include suffix | |
| Dear Sir | or Madam: | | | | |
| "Certifica | ite of Existenc | ion by Foreign Corporation e," or "Certificate of Good n corporation to transact bu | Standing" | and check are sub | ect Business in Florida," omitted to register the |
| Please ret | urn all corresp | ondence concerning this m. | atter to the | following: | |
| Na | ncy Bishai | | | | |
| | | Name | of Person | | |
| M/ | ACKAGE SOF | IO INC. | | | |
| | | Firm/C | Company | | |
| 600 | CHABANEL | WEST | | | |
| | | A | ddress | | |
| Mo | ntreal QUEBE | EC H2N 2K6 | | | |
| | | City/Sta | te and Zip | code | |
| leg | gal@appgroup. | ca | | | |
| | | E-mail address: (to be us | ed for futi | ire annual report r | notification) |
| For furthe | er information | concerning this matter, plea | se call: | | |
| Nancy Bishai at (_514) 388-5287 ext 172 | | | | 172 | |
| N | Name of Person Area Code Daytime Telephone Number | | | | |
| R) D C) 26 | TREET/COU egistration Sec ivision of Corp lifton Building 561 Executive allahassee, FL | oorations ; Center Circle | | MAILING A Registration So Division of Co P.O. Box 6327 Tallahassee, F | ection orporations |
| Enclosed i | is a check for t | he following amount: | | | |
| \$70.00 | Filing Fee | \$78.75 Filing Fee & Certificate of Status | | 5 Filing Fee & fied 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.

| | KAGE SOHO INC. | | | | | |
|------------------------------|--|---|-------------------------|--|--|--|
| (Enter name o "Inc.," "Co.," | f corporation; must include "INCORPORATED," "Corp." "Inc," "Co." or "Corp.") | "COMPANY," "CORPORATION | N," | | | |
| | | | | | | |
| (If name unav | ailable in Florida, enter alternate corporate name ad | dopted for the purpose of transacting | ng business in Florida) | | | |
| 2. <u>NEW YO</u> | ORK 3. | 27-3631155 | | | | |
| (State or cou | ntry under the law of which it is incorporated) | (FEI number, if applicable) | | | | |
| 4. <u>SEPT 28,</u> | 2010 5. | | | | | |
| (D | ate of incorporation) | (Date of duration, if other than perpetual) | | | | |
| 6 | October 1, 2017 | | | | | |
| 7. 123 Merc | (Date first transacted business in 1 (SEE SECTIONS 607.1501 & 607.150 eer St. New York, NY 10012 | Florida, if prior to registration) 12, F.S., to determine penalty liabili | ity) | | | |
| | | l office address) | | | | |
| 600 Chaba | inel West, Montreal Quebec, CANADA H2N2K6 | | | | | |
| | | address, if different) | 728 7 | | | |
| | | | | | | |
| 8. Name and str | reet address of Florida registered agent: (P.O. | Box NOT acceptable) | NOV 13 | | | |
| Name: | Registered Agents Inc. | _ | 3 7 | | | |
| Office Address: | 3030 N. Rocky Point Dr. STE 150A | _ | 537 4 | | | |
| | TAMPA | , Florida 33607 | To To | | | |
| | (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.

Registered Agents Inc.
Bill Havre -Assistant Secretary

(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:

| 11. | ranics | anu | ousiness | address | 62 01 | orneers | and/or | directors |
|-----|--------|-----|----------|---------|-------|---------|--------|-----------|
| | | | | | | | | |

A. DIRECTORS

| Chairman: | Patrick Elfassy | | | | |
|---|---|---|----------|---------------------------------------|--|
| | 600 Chabanel West, Montreal Quebec, CANADA H2N2K6 | | _ | | |
| · | | | | | |
| Vice Chairn | an: Ilan Elfassy | | | | |
| Address: _ | 600 Chabanel West, Montreal Quebec, CANADA H2N2K6 | | _ | | |
| | | | | | |
| Director: _ | Eran Elfassy | | | | |
| Address: _ | 600 Chabanel West, Montreal Quebec, CANADA H2N2K6 | | | | |
| _ | | | | | |
| Director: _ | SEE ATTACHED ADDENDUM FOR ADDITIONAL 8 DIRECTORS | | | | |
| Address: | | | | | |
| | | | | | |
| B. OFFIC | ERS | | | | |
| President: _ | Patrick Elfassy | | | | |
| Address: | 600 Chabanel West, Montreal Quebec, CANADA H2N2K6 | | | | |
| _ | | | | | |
| Vice Preside | nt: | · | _ | | |
| | | | 7 | | |
| _ | | 1-1 | ₹ | 7; | |
| Contain | Patrick Elfocou | 111 7 | _w_ | <u>—</u> — | |
| | Patrick Elfassy | | _¥- | | |
| Address: | 600 Chabanel West, Montreal Quebec, CANADA H2N2K6 | <u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u> | | | |
| Treasurer: _ | Patrick Elfassy | | | | |
| Address: | 600 Chabanel West, Montreal Quebec, CANADA H2N2K6 | | | · · · · · · · · · · · · · · · · · · · | |
| NOTE: If | necessary, you may attach an addendum to the application listing addition | nal officers and/or di | rector | ·s. | |
| 12 | 100 | | | | |
| 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 | llan Elfassy, Director | | | | |
| | (Typed or printed name and capacity of person signing appl | ication) | _ | | |

ADDENDUM TO THE

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA FOR MACKAGE SOHO INC.

Names and Business addresses of its current directors:

- 1. Collins Ward 650 Madison Avenue, 21st Floor, New York, NY 10022 USA
- 2. Meir Elfassy 580 Ansin Boulevard, Hallandale, FL 33009 USA
- 3. Benjamin Hochberg 650 Madison Avenue, 21st Floor, New York, NY 10022 USA
- 4. Yoo Jin Kim 650 Madison Avenue, 21st Floor, New York, NY 10022 USA
- 5. Gary Wassner 650 Madison Avenue, 21st Floor, New York, NY 10022 USA
- 6. Cliff Moskowitz 650 Madison Avenue, 21st Floor, New York, NY 10022 USA
- 7. Jason Kim 55 E 59th St Suite 1100, New York, NY 10022, USA
- 8. Paula Sutter 650 Madison Avenue, 21st Floor, New York, NY 10022 USA

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State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of MACKAGE SOHO INC. was filed on 09/28/2010, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 27th day of October two thousand and seventeen.

Brendan W. Fitzgerald

Executive Deputy Secretary of State