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SUNSHINE CORPORATE FILING OF FLORIDA INC.

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3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

	Sumphanic Distribution Inc
NTITY NAME	Symphonic Distribution, Inc.
OCUMENT NUMB	BER_ (fauren@CC)
	PLEASE FILE THE ATTACHED AND RETURN
XX	Plense FILE THE ATTACHED AND RETURN Plain Copy Certified Copy Certificate of Status File Registration
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	Certificate of Status HIE REGISTRATION
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	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY
	Certified Copy of Arts & Amendments
	Certificate of Good Standing

	**APOSTILLE' / NOTARIAL CERTIFICATION **
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	TIFICATES REQUESTED

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.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busines Delaware 3. (State or country under the law of which it is incorporated) (FEI number, if applicable) 11/15/2017 5. (Date of incorporation) (Date of duration, if other than perp (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 707 N. FRANKLIN STREET, SUITE 400, Tampa, FL 33602 (Principal office address) (Curtent mailing address, if different) (S. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Murtha & Murtha, LLC Murtha & Murtha, LLC		COMPANY," "CORPORATION,"	'ED," "CO	prporation; must include "INCORPORATE prp," "Inc," "Co," or "Corp.")	Enter name of co
Delaware 3. (State or country under the law of which it is incorporated) (FEI number, if applicable) 11/15/2017 5. (Date of incorporation) (Date of duration, if other than perp (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 707 N. FRANKLIN STREET, SUITE 400, Tampa, FL 33602 (Principal office address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Murtha & Murtha, LLC				p_{μ} , m_{e} , c_{0} , $or c_{0}$, r	Inc., Co., Co
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Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Murtha & Murtha, LLC					
Murtha & Murtha, LLC		iddress, if different)	nailing add	(Current ma	
Murtha & Murtha, LLC					
Murtha & Murtha, LLC		Box <u>NOT</u> acceptable)	(P.O. Bo	Laddress of Florida registered agent: (1	Name and <u>stree</u>
				Murtha & Murtha, LLC	
		-			Name:
2236 Ashley Oaks Circle, Suite 101 Tice Address:				2236 Ashley Oaks Circle, Suite 101	ice Address:
WESLEY CHAPEL 33544		33544		WESLEY CHAPEL	
WESLEY CHAPEL , Florida 33544 (City) (Zip code)	:	, Florida (Zin code)		(City)	
		((000)	

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 Equacity. 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chainnan:	
Address:	
/ice Chainnan:	
Address:	
Jorge Brea	
707 N. FRANKLIN STREET, SUITE 400, Tampa, FL 33602	
Address:	· · · · · · · · · · · · · · · · · · ·
	·····
Director:	
Address:	
3. OFFICERS	1
Jorge Brea President:	
707 N. FRANKLIN STREET, SUITE 400, Tampa, FL 33602	· C
/ice President:	22
\ddress:	
jeeretary:	
Address:	
freasurer:	
Address:	·····
NOTE: If necessary, you may attach an addendum to the application listing additional officers an	nd/or directors.
2	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that are true and that he or she is aware that false information submitted in a document to the Departm a third degree felony as provided for in s.817.155, F.S.	the facts stated herein tent of State constitutes

13. Lauren Vadney, Attorney-in-Fact (Typed or printed name and capacity of person signing application)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SYMPHONIC DISTRIBUTION, 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SYMPHONIC DISTRIBUTION, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

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SR# 20177126523 You may verify this certificate online at corp.delaware gov/authver.shtml