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COVER LETTER

| TO: | O: Registration Section Division of Corporations | | | | |
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| SUBJ | ECT: | | RPRISES INC | | |
| Dear S | ir or Madam: | | | | |
| "Certif | ficate of Existence | ion by Foreign Corporation fe," or "Certificate of Good S in corporation to transact bus | tanding" and check are sub | | |
| Please | return all corresp | ondence concerning this ma | tter to the following: | | |
| | | JAN Name | E. C. BRENNOM of Person | 1 | |
| | | ZAisan Firm/C | ENTERPRISES OMPANY | , INC. | |
| | | Sual Ruby F | FIATS Dr. | | |
| <u></u> | | Wi mauma, | F1 33598 e and Zip code att. net ed for future annual report r | | |
| | | Jbrennom | @att.net | | |
| | | E-mail address: (to be use | ed for future annual report r | notification) | |
| For fur | rther information | concerning this matter, pleas | se call: | | |
| JA | NE C. BRE | n at (7/3 Area C | 502 43 | 70 | |
| | Name of Perso | n Area C | ode Daytime Telepi | hone Number | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations | | Registration S | MAILING ADDRESS: Registration Section Division of Corporations | | |
| | Clifton Buildin 2661 Executive Tallahassee, FL | Center Circle | P.O. Box 6327 Tallahassee, F | | |
| Enclos | ed is a check for | the following amount: | | | |
| 2 \$70 | 0.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | □ \$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. ZAISAN ENTER PRISES, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. TEXAS

(State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. DECEMBER 28, 1987

(Date of incorporation)

5. (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 5021 Ruby FlATSDR. W. mAUMA, F1. 33598 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) JANE C. BRENNOM SO21 Ruby Flats Dr.

Wimauma . Florida 33598

(City) (Zip code) Office Address: 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.

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.

Jane C. Brenom

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address:

| Addiess | | |
|------------------|---|---------------------------------------|
| _ | | |
| Director: | | |
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| Address | | · · · · · · · · · · · · · · · · · · · |
| Director: _ | | |
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| B. OFFIC | | 8 JAN |
| | JANE C. BRENNOM | SS |
| Address: _ | 5021 Ruby FIATS Dr. | ris a re |
| | WIMAUUA, F1 33598 | 20 B |
| | ent: | 10. 10. |
| | | |
| Address: _ | | |
| Secretary: _ | STEPHEN O. BRENNOM | |
| Address: _ | 5021 Ruby FIATS Dr. W. MAUMA, FI | 33598 |
| | STEPHEN O. BRENNOM | |
| | 5021 Ruby FIATS Dr. WiMAUMA, FI 335 | 98 |
| | necessary, you may attach an addendum to the application listing additional offic | |
| 12. | Jane C. Brenson, President Signature of Director or Officer | |
| | Signature of Director or Officer | |
| | r or director signing this document (and who is listed in number 11 above) affirms | that the facts stated herein |
| | d that he or she is aware that false information submitted in a document to the Deprese felony as provided for in s.817.155, F.S. | partment of State constitutes |
| | JANE C. BRENNIM, PRESIDENT | |
| 13 | (Typed or printed name and capacity of person signing application) | |
| | () i i i i i i i i i i i i i i i i i i | |

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for ZAISAN ENTERPRISES, INC. (file number 105093100), a Domestic For-Profit Corporation, was filed in this office on December 28, 1987.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Sea of State at my office in Austin, Texas on December 11, 2017.





Rolando B. Pablos Secretary of State

 Phone: (512) 463-5555
 Fax: (512) 463-5709
 Dial: 7-1-1 for Relay Services

 Prepared by: Renee Guerrero
 TID: 10264
 Document: 780368400002