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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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D. SCOTT FEB - 7 2013

COVER LETTER

TO:	Registration Section			
	Division of Corporations Fumari, Inc.			
SUBJ	ECT:			
	Nan	ne of corporatio	n - must include suffix	
Dear S	Sir or Madam:			
"Certi	iclosed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation t	ate of Good Sta	nding" and check are sub	
Please Issa G	return all correspondence conce , Abuaita	erning this matte	er to the following:	
Fumar	i.Inc.	Name of	Person	
675 G	ateway Center Drive, Ste A	Firm/Co	npany	高 T
San D	iego, CA 92102	Add	ress	TO A M
issa@	fumari.com	·	and Zip code	11: 45
	E-mail addı	ess: (to be used	for future annual report	notification)
For fu	rther information concerning thi	s matter, please	call:	
Issa G. Abuaita		619	331-3535 x 723	
	_	at ()	
	Name of Person	Area Co	de Daytime Telep	phone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		ESS:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	
Enclo	sed is a check for the following	amount:		
□ \$7	0.00 Filing Fee 💢 \$78.75 Fi Certifica	iling Fee & te 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

(Entar name of se	orporation; must include "INCORPORATED,"	"COMPANY" "CORPORATION"	
	orp," "Inc." "Co," or "Corp.")	COMPANY. CONFORMATION.	
California		lopted for the purpose of transacting business in I 31-1098482	
January 1, 2016		(FEI number, if applicable)	
	5	(Date of duration, if other than perpetual	
(Date	or incorporation)	(Date of duration, if other than perpetual	1)
	(SEE SECTIONS 607.1501 & 607.150) ter Drive, Suite A., San Diego, CA 92102 (Principal	l office address)	
Name and etrac	(Current mailing taddress of Florida registered agent: (P.O.	address, if different) Box NOT acceptable)	コーコー
	Registered Agents Inc.	The state of the s	177
Name:	3030 N. Rocky Point Dr., Ste 150A	—	
ffice Address:	Tampa	33067 (25.1) , Florida 33	i. is
	(City)	(Zip code)	
Registered age	ent's acceptance: ed as registered agent and to accept service	e of process for the above stated corporatio ent as registered agent and agree to act in t	his capacit
aving been nam signated in this rther agree to c	application, I hereby accept the appointme omply with the provisions of all statutes rel amiliar with and accept the obligations of a	lative to the proper and complete performa	nce of my

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 Vice Chairman: Address: Mohammed W Abdo 1Director: 675 Gateway Center Dr., Suite A Address: San Diego, CA 92102 Maher K Saba Director: 675 Gateway Center Dr., Suite A Address: San Diego, CA 92102 **B. OFFICERS** Maher K Saba President: 675 Gateway Center Dr., Suite A Address: San Diego, CA 92102 Mohammed W Abdo √Vice President: 675 Gateway Center Dr., Suite A Address: San Diego, CA 92102 Maher K Saba -Secretary: 675 Gateway Center Dr., Suite A, San Diego, CA 92102 Address: Maher K Saba ∫reasurer: 675 Gateway Center Dr., Suite A. San Diego, CA 92102 Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Maher K Saba, President Maher K. Saba / President 13. _

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

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

FUMARI, INC.

FILE NUMBER:

C3854968

FORMATION DATE:

01/01/2016

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity:



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 22, 2018.

ALEX PADILLA
Secretary of State