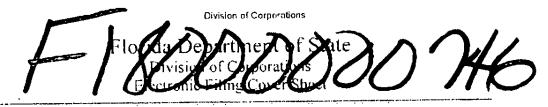
2/13/2018



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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (614)280-3338

Phone Fax Number

: (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		
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## FOREIGN PROFIT/NONPROFIT CORPORATION BUTTERFLY TRAINING CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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## 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. Butterfly Training Corp. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Plorida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) Perperuai January 13, 2018 4. (Date of duration, if other than perpetual) (Date of incorporation) Business to commence upon acceptance of filing (Dute first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) c/o Bay Economic Development Alliance, 5230 West Highway 98, Panama City, Florida 32401 (Principal office address) 1 same as above (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System: Name: 1200 South Pine Island Road Office Address: Plantation , Florida (City) 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 agrae 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. poration System

10. Attached is a certificate of existence duly authenticated, not more han 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.

(Registered agent a signature)

II. Name	s and business addresses of officers and/or directors:	
A. DIREC	CTORS	
Chairman:	Olivier David c/o Bay Economic Development Alliance, 5230 West Highway 98	
	Danama City Florida 32401	
Vice Chair	man:	
Address: _		<del></del>
Autress		
		8
Address: _		<del>- 7</del>
_	<u> </u>	
Director: _		
Address: _		<u></u> =
		رس تن <u>دوسة</u>
B. OFFI		95
President	Olivier David c/o Bay Economic Development Alliance, 5230 West Highway 98	<del></del>
Address: _		
_	Panama City, Florida 32401	<u> </u>
Vice Presid	idon:	
Address: _		
, <b>-</b>		<del></del>
Secretary:	Olivier David	401
Address: _	Olivier David c/o Bay Economic Development Alliance, 5230 West Highway 98, Panama City, FL 324	
Treasurer:	Olivier David	
Address: _		
NOTE:	If necessary, you may attach are added dum to the application listing additional officers and/or directors.	
are true a a third de	cer or director signing this document (and who is listed in number 11 above) affirms that the facts stated in and that he or she is aware that falso information submitted in a document to the Department of State con- egree felony as provided for in s.817.155, F.S.	nercin stitutes
13. <u>O</u>	Olivier David, CEO, President, Treasurer & Secretary  (Typed or printed name and capacity of person signing application)	

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "BUTTERFLY TRAINING CORP." 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 FEBRUARY, A.D.

2018.

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

6733699 8300

SR# 20180947050

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

Authentication: 202141404

Date: 02-13-18