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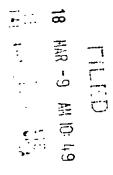
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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03/02/18--01019--005 **87.50





COVER LETTER

TO:	Registration Section				
	Division of Corporations				
	Syndicate Global Distribution	, Inc.			
SUBJ	JECT:				
	Name o	of corporatio	n - must	include suffix	
Dear S	Sir or Madam:				
"Certi	nclosed "Application by Foreign Co ficate of Existence," or "Certificate referenced foreign corporation to tr	of Good Sta	ınding" a	nd check are subm	
	return all correspondence concerni ew Ryan	ng this matt	er to the f	following:	
		Name o	f Person		
Syndic	cate Global Distribution, Inc.				
		F:/C			
7916 F	Evolutions Way, Suite 200	Firm/Co	mpany		
		Add	ress		
Trinity	v. Florida 34655				
		City/State	and Zip o	rode	
mryan	@nicopure.com	City/State	and zip c	lode	
		(10 ha nead	Lifer futur	re annual report no	vification)
	E-man address	: (to be used	101 10101	e annuar report ne	onneadon)
For fu	orther information concerning this m	atter, please	call:		
Marth	au Dunn	888	425-6649 ext 7308		
Matth	ew Ryan	=			
	Name of Person	Area Co	de	Daytime Teleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		S:		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclo	sed is a check for the following amo	ount:			
☐ \$7	0.00 Filing Fee	_		5 Filing Fee & Ted Copy	S87.50 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. Syndicate Global Distribution, Inc. 1. (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) 82-3357352 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) October 31, 2017 N/A (Date of duration, if other than perpetual) (Date of incorporation) N/A (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7916 Evolutions Way, Suite 200, Trinity, Florida 34655 (Principal office address) Same (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Matthew Ryan Name: 7916 Evolutions Way, Suite 200 Office Address: 34655 Trinity _____ , 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 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 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:

A. DIR	ECTORS
Chairman	Jeffrey Stamler
Address:	7916 Evolutions Way, Suite 200
110010001	Trinity, FL 34655
Vice Cha	Jason Del Giudice
	7916 Evolutions Way, Suite 200
Address:	Trinity, FL 34655
Director:	
Address:	
Director	
Address:	
B. OFF	TOFRS
D. Off	Jeffrey Stamler
President	7916 Evolutions Way. Suite 200
Address:	
	Trinity, FL 34655
Vice Pres	Jason Del Giudice
Address:	7916 Evolutions Way. Suite 200
Address.	Trinity, FL 34655
	Kenneth Stamler
Secretary	7916 Evolutions Way, Suite 200, Trinity, FL 34655
Address:	James Caci
Treasurer	
Address:	7916 Evolutions Way, Suite 200, Trimity, FL 34655
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	
	/ Signature of Director or Officer
are true	cer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes egree felony as provided for in s.817.155, F.S.
13.	James CACI Trasurer
	(Typed or printed name and capacity of person signing application)

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SYNDICATE GLOBAL 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 . THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF FEBRUAR.,

A.D. 2018.

6598903 8300

5R# 20180634866

Date: 02-12-18

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

/ Authentication: 202130004