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Division of Corporations

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Page 1 of 2

Florida Department of State  
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Division of Corporations  
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From:

Account Name : VCORP SERVICES, LLC  
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**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Global Health Africa, Inc.**

Certificate of Status	0
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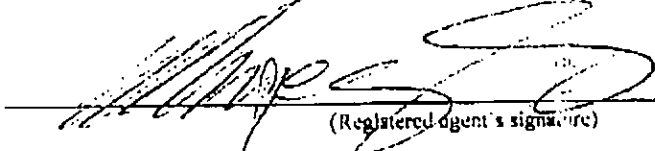
# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

1. Global Health Africa, 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. Delaware 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/10/2018 5. (Date of incorporation) (Date of duration, if other than perpetual)
6. n/a  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 6944 NW 126th Avenue, Parkland, FL 33076  
(Principal office address)
- (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Chukwuemeka Ikpeazu
- Office Address: 6944 NW 126th Avenue
- Parkland, Florida 33076  
(City) (Zip code)

## 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.

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Chukwuemeka Ikpeazu

Address: 6944 NW 126th Avenue, Parkland, FL 33076

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Chukwuemeka Ikpeazu

Address: 6944 NW 126th Avenue, Parkland, FL 33076

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Chukwuemeka Ikpeazu

Address: 6944 NW 126th Avenue, Parkland, FL 33076

Treasurer: Chukwuemeka Ikpeazu

Address: 6944 NW 126th Avenue, Parkland, FL 33076

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. \_\_\_\_\_

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.

13. Chukwuemeka Ikpeazu, President: \_\_\_\_\_

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

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# Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLOBAL HEALTH AFRICA, 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 TWELFTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLOBAL HEALTH AFRICA, INC." WAS INCORPORATED ON THE TENTH DAY OF APRIL, A.D. 2018.

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

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