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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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

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FOREIGN PROFIT/NONPROFIT CORPORATION
Caribu Inc.

Certificate of Status	1
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Corporate Filing Menu

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K. SALY

FILED
18 APR 25 AM 10:25
RECEIVED
2018 APR 25 PM 5:00
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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.

Caribu Inc.

1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Delaware

2. (State or country under the law of which it is incorporated)
9/1/2015

3.

(FEI number, if applicable)

4. (Date of incorporation)

5.

(Date of duration, if other than perpetual)

6. (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
111 NE 1st Street, 8th Floor Suite 112, Miami, FL 33132

7. (Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NO acceptable)

Maxime Tuchman

Name:

111 NE 1st Street, 8th Floor Suite 112

Office Address:

Miami

33132

(City)

Florida

(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.

Maxime Tuchman

(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Maxeme Tuchman

Director: _____

111 NE 1st Street, 8th Floor Suite 112, Miami, FL 33132

Address: _____

Alvaro Sabido

Director: _____

111 NE 1st Street, 8th Floor Suite 112, Miami, FL 33132

Address: _____

B. OFFICERS

Chief Executive Officer: Maxeme Tuchman

Address: 111 NE 1st Street, 8th Floor Suite 112, Miami, FL 33132

Chief Technology Officer: Alvaro Sabido

Address: 111 NE 1st Street, 8th Floor Suite 112, Miami, FL 33132

Alvaro Sabido

Secretary: 111 NE 1st Street, 8th Floor Suite 112, Miami, FL 33132

Address: Alvaro Sabido

Treasurer: 111 NE 1st Street, 8th Floor Suite 112, Miami, FL 33132

Address: _____

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

12. Maxeme Tuchman
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. Maxeme Tuchman, Director
(Typed or printed name and capacity of person signing application)

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARIBU 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 TWENTY-FIFTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CARIBU INC." WAS INCORPORATED ON THE FIRST DAY OF SEPTEMBER, A.D. 2015.

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

5813877 8300

SR# 20183010419

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

Authentication: 202577851

Date: 04-25-18