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CT Corp.

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: 05/09/2018

	Acc#I20160000072	D26		
IFS Enterpr	ses Inc. (DE)			
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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. (Enter name of	of corporation; must include "INCORPORATED," "	COMPANY " "CORPORATION"			_
"Inc.," "Co.,"	"Corp," "Inc," "Co," or "Corp.")	committee, cold olderton,			
(If name unay	vailable in Florida, enter alternate corporate name ado	nted for the purpose of transacting bu	ısiness ir	ı Florida)	_
Delaware				,	
(State or cou	(State or country under the law of which it is incorporated) (FEI number, if applied)				_
March 21, 20 4.	018				
	5				
N/A 6.		(, ,	,	
0	(Date first transacted business in Fl	orida, if prior to registration)		_	_
	(SEE SECTIONS 607.1501 & 607.1502	F.S., to determine penalty liability)		2018	
	Drive, Fort Meyers, Florida 33901		;- >>	75 75 75	
	(Principal office address)				
				۵	Ī
	(Current mailing a	ddress, if different)	:	انز	_ [
			- '	<u></u> :	
8. Name and st	reet address of Florida registered agent: (P.O. E	Box <u>NOT</u> acceptable)	•	12	
N	National Registered Agents, Inc.		•	S.	
Name:	1200 South Pine Island Road	_			
Office Address		<u> </u>			
	Plantation	33324 , Florida			
	(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.

James M. Halpin
Assistant Secretary

(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. DIRECTORS Chairman: Michael Libasci 3641 Clay Street Address: San Francisco, CA 94118 Vice Chairman: Address: ____ Director: Director: **B. OFFICERS** Michael Libasci President: 3641 Clay Street Address: _ San Francisco, CA 94118 Vice President: **ار**<! Address: ___ Michael Libasci Secretary: ___ 3461 Clay Street, San Francisco, CA 94118 Address: N/A Treasurer: Address: _____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Mohal 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. Michael Libasci, President

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

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "IFS ENTERPRISES, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

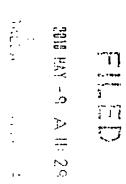
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MARCH, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IFS ENTERPRISES, INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2018.

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





Authentication: 202377048

Date: 03-23-18

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