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

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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 27, 2018

YVETTE MIRANDA PO BOX 6957 STATELINE, NV 89449-4470

SUBJECT: WEB SOLUTIONS MARKETING CORPORATION

Ref. Number: W18000055332

We have received your document for WEB SOLUTIONS MARKETING CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 918A00013348

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COVER LETTER

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SUBJECT: W	EB SOLUT	IONS MARKET	TING CO	RPO	RATION			
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Dear Sir or Mada	um:							
	xistence," o	r "Certificate o	f Good	Standi	athorization to Transa ng" and check are sub in Florida.			
Please return all	corresponde	ence concerning	g this ma	atter to	the following:			
Yvette Miranda								
			Name	of Pe	rson			
			Firm/0	"oppo				
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P.O. Box 6957			Δ.	ddress			- 7 3	
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Stateline, NV 89	449-4470		City/Sto	tu and	Zip code		3	
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support@Nevada		-mail address:	(to be us	sed for	future annual report	notification)	•	
For further infor	mation conc	erning this ma	tter, plea	ise cal	1:	,	·· ·· ·	
Yvette Miranda		ai	1 (<u>775</u>		322-5062			
Name of Person			Area Code Daytime Telephone Number					
Registra Division Clifton I 2661 Ex	tion Section of Corpora	tions ter Circle			MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7		
Enclosed is a che	eck for the f	ollowing amou	nt:					
▽ \$70.00 Filing	Fee 🗆	\$78.75 Filing Certificate of			\$78.75 Filing Fee & Certified Copy		Filing Fe rate of S	tatus 8

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 co	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")		COMPANY," "CORPORATION,"				
	(If name unavaila	able in Florida, enter alternate corporate name	 e ad	opted for the purpose of transacting b	ousiness in Floric			
2. Nevada			3. 83-0649915					
(State or country under the law of which it is incorporated)			(FEI number, if applicable)					
4.	May 23, 2018	5	5. Perpetual					
(Date of incorporation)				(Date of duration, if other than perpetual)				
6.	UPON REGIST	RATION						
7	297 Kingsbury Gr	rade, Suite 100, Stateline, NV 89449		2, F.S., to determine penalty liability) office address)				
	P.O. Box 4470, S	Stateline, NV 89449-4470						
		;	: 1					
8.	Name and stree	et address of Florida registered agent: (P	.O.	Box <u>NOT</u> acceptable)	, ·	·		
	Name:	Northwest Registered Agent, LLC.		<u> </u>		•		
Office Address:	3030 N. Rocky Point Dr. STE 150A		 .	.: -	•			
	Tampa		, Florida <u>33607</u>	•				
	(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.



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: _____ Vice Chairman. Address: Director: David Batnck Address - Apartago 0816-00386, Panama, Republica de Panama Director: _ B. OFFICERS President: David Batrick Address - Apartado 0816-00386, Panama, República de Panama Vice President Secretary: David Batrick Apartado 0816-00386, Panamá, República de Panamá Address: Treasurer David Batnok Address: Apartado 0816-00386, Panama, República de Panama NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. David Batrick, President

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada-Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **WEB SOLUTIONS MARKETING**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 23, 2018, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 7, 2018.

Ballons K. Cegarske

Barbara K. Cegavske Secretary of State

Electronic Certificate

Certificate Number: C20180607-0419