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From:

Account Name : SALMON LEGAL GROUP, P.L.

Account Number : I20180000045 Phone : (786)508-2020

Fax Number : (786)209-3030

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 BIOVERSE LABS CORP

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Help

N CULLIGAN

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.	BIOVERSE LABS, Come of corporation: must include "INCORPORATED," "C	ORP	
(Enter na "Inc" "C	me of corporation: must include "INCORPORATED, "Co.," "Corp.," "Inc.," "Co.," or "Corp.,")	OMPANY," "CORPORATION,	
(If name)	unavailable in Florida, enter alternate corporate name adop	oted for the purpose of transacting business in Floric	da)
2	DELAWARE 3.		
(State of	DELAWARE 3. country under the law of which it is incorporated)		
4	OCTOBER 13, 2017 5. (Date of incorporation)		
	(Date of incorporation)	(Date of duration, if other than perpetual)	
6	APRIL 05,		-
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502.		
7	300 DELAWARE AVE, ST	E 210-A, WILMINGTON, DE 19801	
	(Principal	office address)	2018
		ME AS ABOVE	18 SEP
	(Current mailing ac	ddress, if different)	-6
8. Name ar	nd <u>street address</u> of Florida registered agent: (P.O. B	fox NOT acceptable)	P-6 PH 4: 10
Na	me: SALMON LEGAL GROUP, P.L.		<u> </u>
Office Add	ress: 1395 BRICKELL AVENUE, STE 800	- -	0
	MIAMI, (City)	_ , Florida	
	(City)	(Zip code)	
Having bed designated further agr	red agent's acceptance: In named as registered agent and to accept service of in this application, I hereby accept the appointment ee to comply with the provisions of all statutes relat I am familiar with and accept the obligations of m	it as registered agent and agree to act in this c tive to the proper and complete performance o	capacity. I
	David H. Salmon David M. Salmon		

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.

(Registered agent's signature)

il. Nam	es and business addresses of officers and/or directors:
A. DIRE	CCTORS
Chairman:	FRANCISCO D'ELIA
Address:	5781 SW 13TH STREET, PLANTATION, FL 33317
Vice Chai	rman:
Address:	
Director:	ZACHARY LADIN
Address:	131 WINSLOW ROAD, NEWARK DE 19711
Director:	CHRISTOS STAMATOPOULOS FOR STAMATOPOULOS
Address:	1511 RIVERVIEW DRIVE, MELBOURNE, FL 32901
B. OFF	CERS FIGURE
President:	
Address:	
Vice Presi	dent:
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	· · · · · · · · · · · · · · · · · · ·
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	- xdia DEC
The offic	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein nd that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S.
13	FRANCISCO D'ELIA
	(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 "BIOVERSE LABS, CORP." 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-NINTH DAY OF AUGUST, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIOVERSE LABS, CORP." WAS INCORPORATED ON THE THIRTEENTH DAY OF OCTOBER, A.D. 2017.

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

Authentication: 203335748

Date: 08-29-18

6577676 8300 SR# 20186421469