F18000004153

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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K. SALY SEP 1 0 2018 CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 234109 4326600

AUTHORIZATION : Spelle Rec

COST LIMIT : \$ 70.00

ORDER DATE: May 29, 2018

ORDER TIME : 9:19 AM

ORDER NO. : 234109-120

CUSTOMER NO: 4326600

FOREIGN FILINGS

NAME: PAINTZEN INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO:	Registration Section Division of Corpora					
	PAINTZEN					
SUBJ	JECT:	NC.				
		Name of corpora	tion - must	include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existence,"	by Foreign Corporation or "Certificate of Good Surporation to transact but	Standing" a	nd check are sub		
Please	return all correspone	ence concerning this ma	atter to the	following:		
	-			_		
		Bill Adams Name	of Person			
		lain/zen In	ــــــــــــــــــــــــــــــــــــــ			
		Firm/C	Company			
		242 W. 30+h	57.	Room 500		
		A	ddress			
		New York 1	VY 10	001		
		City/Sta	te and Zip	ode		
		bill apaintzer	n EUM			
	T	E-mail address: (to be us	ed for futu	e annual report i	notification)	
r. <i>r</i>	A 1. C			•	,	
ror m	nner information con	cerning this matter, plea	se call:			
	Name of Person	at (Area ()	D: 70.1		
	Name of Person	Area	oac	Daytime Felep	hone Number	
STREET/COURIER ADDRESS:				MAILING ADDRESS:		
Registration Section				Registration Section		
Division of Corporations Clifton Building				Division of Corporations P.O. Box 6327		
2661 Executive Center Circle				Tallahassee, FL 32314		
	Tallahassee, FL 32			i ananassee, 1	L 02014	
Enclos	sed is a check for the	following amount:				
■ \$70	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		5 Filing Fee & ied Copy	S87.50 Filing Fee, Certificate of Status &	
				·	Certified Copy	

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.

(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	 la)
DELAWARE	,
2. (State or country under the law of which it is incorporated) (FEI number, if applicable)	
04/18/7013	
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)	
242 WEST 30TH STREET, ROOM 500, NEW YORK, NY 10001	6
(Principal office address)	野工
(Current mailing address, if different)	T E D
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Corporation Service Company Name:	1 5: 40
Office Address:	
Tallahassec 32301 , 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 a designated in this application, I hereby accept the appointment as registered agent and agree to act in this confurther agree to comply with the provisions of all statutes relative to the proper and complete performance of duties, and I am familiar with and accept the obligations of my position as registered agent.	apacity. I of my
Corporation Service Company By: Asst. Vice F	
(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:	18 SEP-7 AM 5: 40
A. DIRECTORS	Signal AH 5: 40
MICHAEL RUSSELL Chairman:	MLLAHASSE STATE
Address: 242 WEST 30TH STREET, ROOM 500, NEW YORK, NY 10001	TALLAHASSEE, PLORIDA
JUSTIN GELLAR Vice Chairman:	· .
45 WOODCREST DRIVE, WOODCLIFF LAKE, NJ 07677 Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS MICHAEL RUSSELL President:	
Address: 242 WEST 30TH STREET, ROOM 500, NEW YORK, NY 10001	
JUSTIN GELLAR Vice President:	
45 WOODCREST DRIVE, WOODCLIFF LAKE, NJ 07677 Address:	
Secretary:	
Address:	
Treasurer:	
Address:	· · · · · · · · · · · · · · · · · · ·
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or directors.
12.	
Signature of Rirector or Officer The officer or director signing this document (and who is listed in number 11 above) af are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.	firms that the facts stated herein e Department of State constitutes
13. Justin Geller COO (Typed or printed name and capacity of person signing applica	tion)

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PAINTZEN 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-NINTH DAY OF MAY, 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 "PAINTZEN INC."

WAS INCORPORATED ON THE EIGHTEENTH DAY OF APRIL, A.D. 2013.

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

18 SEP -7 AM 5: 40
SLORELANT OF STATE
ALL ALLEGEF FLORIDA



Authentication: 202780908

Date: 05-29-18

5321693 8300 SR# 20184523951