F18000004457

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Au	idicəs)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900318801739

18 SEP 25 AM 9: 33

25 Aff 9: 33

9/26/18/05

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.Incserv.com e-mail: info@incserv.com

incserv^o

ORDER FORM

TO : Florida Department of State

Division of Corporations, Clifton

Building

2661 Executive Center Circle

Tallahassee, FL 32301

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST DATE 9/25/2018

PRIORITY Routine

OUR REF # (Order ID#) 685912

-,-

ORDER ENTITY LICENSE 1237, INC.

	Ë	<u></u>	
PLEASE PERFORM THE FOLLOWING SERVICES: LICENSE 1237, INC. (FL)		,	1;
File the attached foreign qualification document	•	~! (\)	
Please provide a certified copy as evidence.			- 1:1
Short Form Good Standing Certificate		÷	
NOTES:	* 	<u></u>	
Email address for annual report reminders: nhowe@jonesday.com			

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, September 25, 2018 Page 1 of 1

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.

		pted for the purpose of transacting bus	SHICSS III	Florida
Delaware	3	(FEI number, if applical		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applica	ble)	
September 6,	 			
(Date	e of incorporation)	(Date of duration, if other than	perpetua	4)
			•	****
	(Date first transacted business in FI		<u>.</u>	-2,
	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability)	1.	
1237 7th Street, S	Santa Monica, CA 90401			150
	(Principal	office address)		_'1
				>
(Current mailing address, if different)		•	ς,	
				W
. Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)		•
Name:	Corporation Service Company			
Office Address:	1201 Hays Street			
	Tallahassec	, Florida 32301		
	(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.

Dwight (044), VP (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: Director: Gunner Winston 1237 7th Street, Santa Monica, CA 90401 Director: **B. OFFICERS** President: Gunner Winston Address: 1237 7th Street, Santa Monica, CA 90401 Secretary: Katrina Basic Address: 1237 7th Street, Santa Monica, CA 90401 Treasurer: Katrina Basic Address: _____1237 7th Street, Santa Monica, CA 90401 NOTE: If necessary, you may attach an addendurg 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. Gunner Winston, Director and President

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LICENSE 1237, INC." IS DULY

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

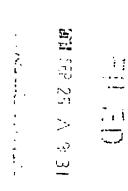
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF SEPTEMBER, A.D.

2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LICENSE 1237, INC." WAS INCORPORATED ON THE SIXTH DAY OF SEPTEMBER, A.D. 2018.

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





Authentication: 203479578

Date: 09-24-18

7039904 8300 SR# 20186803835