

F18000004919

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

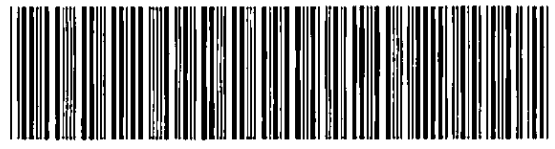
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600320046106

FILED

2018 OCT 29 AM 9:01  
SECRETARY OF STATE  
TALLAHASSEE, FL

RECEIVED  
SECRETARY OF STATE  
18 OCT 29 AM 12:45

OCT 30 2018  
S. PRATHER

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 461639 7202264

AUTHORIZATION :

COST LIMIT :

*[Handwritten Signature]*  
\$ 78.75

ORDER DATE : October 26, 2018

ORDER TIME : 8:59 AM

ORDER NO. : 461639-005

CUSTOMER NO: 7202264

FOREIGN FILINGS

NAME: MANNIS GROUP, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MANNIS GROUP, INC.  
\_\_\_\_\_  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:  
NYISHA SHAKUR

\_\_\_\_\_  
Name of Person  
MINTZ  
\_\_\_\_\_  
Firm/Company  
666 THIRD AVENUE  
\_\_\_\_\_  
Address  
NEW YORK, NY 10017  
\_\_\_\_\_  
City/State and Zip code  
JOANN@SUIGENERISLLC.COM  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NYISHA SHAKUR                      212                      692-6728  
\_\_\_\_\_  
Name of Person                      Area Code                      Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 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.

2018 OCT 29 AM 9:01  
 SECRETARY (OFFICE)  
 TALLAHASSEE, FL  
**FILED**

1. MANNIS GROUP, INC.  
 (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)

2. DELAWARE 3. \_\_\_\_\_  
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/9/18 5. \_\_\_\_\_  
 (Date of incorporation) (Date of duration, if other than perpetual)

6. NO BUSINESS HAS BEEN CONDUCTED IN FLORIDA  
 (Date first transacted business in Florida, if prior to registration)  
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2700 NORTH OCEAN DRIVE, TS 11A, SINGER ISLAND, FL 33404  
 (Principal office address)

---

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, 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.*

Corporation Service Company  
 By: Roxanne Turner  
 (Registered agent's signature)

Roxanne Turner  
 Asst. Vice President

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: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: JEFFREY CITRON

Address: 2700 NORTH OCEAN DRIVE, TS 11A, SINGER ISLAND, FL 33404  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: JEFFREY CITRON

Address: 2700 NORTH OCEAN DRIVE, TS 11A, SINGER ISLAND, FL 33404  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: JEFFREY CITRON

Address: 2700 NORTH OCEAN DRIVE, TS 11A, SINGER ISLAND, FL 33404  
\_\_\_\_\_

Treasurer: JEFFREY CITRON

Address: 2700 NORTH OCEAN DRIVE, TS 11A, SINGER ISLAND, FL 33404  
\_\_\_\_\_

FILED  
2018 OCT 29 AM 9:01  
SECRETARY OF STATE  
TALLAHASSEE, FL

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  \_\_\_\_\_  
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. JEFFREY CITRON, PRESIDENT  
\_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MANNIS GROUP, 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-SIXTH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MANNIS GROUP, INC." WAS INCORPORATED ON THE NINTH DAY OF AUGUST, A.D. 2018.

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



7010590 8300

SR# 20187353420

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203693948

Date: 10-26-18