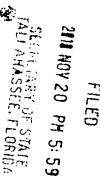
F18000005496

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

Office Use Only



11/20/18--01005--018 **70.00



1/4

COVER LETTER

TO:	Registration Sec Division of Corp				
CHDI	Sun Baske	t, Inc.			
SUBJ	ECT:	Name of corpora	tion - n	nust include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence	on by Foreign Corporation "or "Certificate of Good or corporation to transact but	Standir	g" and check are sub	
Please John I	•	ondence concerning this ma	atter to	the following:	
		Name	of Per	son	
RBM	LLP				
624 Tr	ravis St., Suite 800	Firm/C	Compai	ny	
		A	ddress		
Shreve	eport, LA 71101				
		City/Sta	te and	Zip code	
jdietze —	l@rbm.com				
		E-mail address: (to be us	sed for	future annual report r	notification)
For fu	rther information	concerning this matter, plea	se call	:	
John L	Dietzel	318		429-7580	
	Name of Persor	at (n) Code	Daytime Telep	hone Number
	Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle 32301		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclos	sed is a check for t	he following amount:			
\$ \$7	0.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		78.75 Filing Fee & Tertified 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.

1.	Sun Basket, Inc			
••	(Enter name of c	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED,	"COMPANY," "CORPORATION,"
	(If name unavail	able in Florida, enter alternate corporate nar	ne	adopted for the purpose of transacting business in Florida)
2.	Delaware		3	45-4346475
4.	(State or countr 12/28/2011	y under the law of which it is incorporated)	5.	(FEI number, if applicable)
· · · · · · · · · · · · · · · · · · ·				(Date of duration, if other than perpetual)
7.,	5215 Hellyer Ave			response florida, if prior to registration) 502, F.S., to determine penalty liability) all office address)
	624 Travis St., S	(Printing 800 Shreveport, LA 7110)	acij	pal office address)
		(Current ma	ili	10 P
8.	Name and street	et address of Florida registered agent; (P.0). Box NOT acceptable)
	Name:	Corporation Service Company		<u>. </u>
O	ffice Address:	1201 Hays Street		
		Tallahassee		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 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.

SHERIE HINTON ASSISTANT SECRETARY

(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:			
Address:			
Vice Chairman:	- <u></u> -		
Address:			
Director:			
Address:			
Director:			
Address:			
	<u> </u>		
B. OFFICERS			
Adam Zbar President:			
5215 Hellyer Ave., Suite 250 Address:		*******	
San Jose, CA 95138	18 . 12. 12. 12. 12. 12. 12. 12. 12. 12. 12	21	
Don Barnett Vice President:	200		
5215 Heyller Ave., Suite 250 Address:	Son	- 7 -2	<u></u>
San Jose, CA 95138		-	E
Secretary:		က် <u>.</u> ဘ <u>x</u>	<u> </u>
Address:		59	
Todd Smith Treasurer:			
5215 Hellyer Ave., Suite 250 San Jose, CA 95138			
	1 000		
NOTE: If necessary, you may attach an addendum to the application listing additiona	officers and/or dire	ctors.	
Signature of Director or Officer	1		
The officer or director signing this document (and who is listed in number 11 above) a 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.	iffirms that the facts he Department of St	stated h ate cons	icrein stitutes
13. Todd Smith - VP, Corporate Controller			
(Typed or printed name and capacity of person signing applications)	ation)	-	



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

DELAWARE, DO HEREBY CERTIFY "SUN BASKET, 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 AUGUST, A.D. 2018.

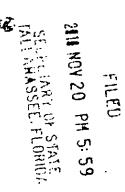
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUN BASKET,

INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF DECEMBER, A.D.

2011.

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



5087611 8300 SR# 20186318802



Authentication: 203304027

Date: 08-24-18