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(Re	questor's Name)	
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COVER LETTER

TO:	Registration Section Division of Corporations			
SHRI	Jazzware, Inc	•		
эор.		ation - m	ust include suffix	
Dear S	Sir or Madam:			
"Certi	nclosed "Application by Foreign Corporation ficate of Existence," or "Certificate of Good referenced foreign corporation to transact bu	Standing	g" and check are sub	ct Business in Florida." omitted to register the
	return all correspondence concerning this man A. Stormoen, Esq.	atter to	he following:	
	Nam ORMOEN LAW	e of Pers	on	
10	Firm/ 11 Camino Del Rio South, Suite 531	Compan	y	
San	a Diego, CA 92108	ddress		
ron	City/Sta @stormoenlaw.com	ate and Z	ip code	
	E-mail address: (to be u	sed for f	uture annual report r	notification)
For fu	rther information concerning this matter, ple	ase call:		
Ron A	. Stormoen 61	9	236-8655	
	Name of Person Area	Code	Daytime Telep	hone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A. Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclos	sed is a check for the following amount:			
\$ 70	0.00 Filing Fee \$\Bigcup \text{S78.75 Filing Fee & Certificate of Status}		8.75 Filing Fee & rtified 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. ISO3, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

I. (Enter name of our "Inc.," "Co.," "Cor	poration; must include "INCORPORATEE p," "Ine," "Co," or "Corp.")	O," "COMPANY," "CORPORATION,"	-
Delaware	·	te adopted for the purpose of transacting business in Florida) 83-1897491	-
September 13	under the law of which it is incorporated) 3, 2018 of incorporation)	(FEI number, if applicable) (Date of duration, if other than perpetual)	-
6		s in Florida, if prior to registration)	_
	(SEE SECTIONS 607.1501 & 607 d Parkway NW, Suite 140, Boca Raton, Fi	.1502, F.S., to determine penalty liability)	
/·	(Prin	cipal office address)	-
	(Current ma	iling address, if different)	18 NO
8. Name and street Name:	address of Florida registered agent: (Corporation Service Company	P.O. Box NOT acceptable)	DIVISION OF CORPORATIONS 14
Office Address:	1201 Hays Street		PH 5:
	Taltahassce, FL (City)	32301 , Florida (Zip code)	1 1080
designated in this further agree to co	nt's acceptance: ed as registered agent and to accept so application, I hereby accept the appo	ervice of process for the above stated corporation at th intment as registered agent and agrce to act in this cap es relative to the proper and complete performance of	pacity. I
	March Control of the	red 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. Nam	nes and business addresses of officers and/or directors:		
A. DIR	ECTORS		
Chairman	ı:		·
Vice Cha	irman:		
			·== ·
Director:	Thomas Clancy		
	6001 Broken Sound Parkway NW, Suite 140, Boca Raton, FL 33487		
Director:	Raj Idiculla		
Address:	6001 Broken Sound Parkway NW, Suite 140, Boca Raton, FL 33487		
B. OFF	Thomas Clancy		
Address:	6001 Broken Sound Parkway NW, Suite 140, Boca Raton, FL 33487	B NOV 3	VISION OF
Vice Pres	ident:	— P	A SOLATOR A
Address:		- 1 ⁺	A HONE
Secretary			
Address:	Raj Idiculla		
Treasurer			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or described in a specific property of the state of the specific property of the state of the specific property of the state of the state of the specific property of the state of the sta	irectors.	
The office are true	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that the fact and that he or she is aware that false information submitted in a document to the Department of egree felony as provided for in s.817.155, F.S.	ts stated	herein
13	Raj Idiculla, Chief Financial Officer		
	(Typed or printed name and capacity of person signing application)		

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

DELAWARE, DO HEREBY CERTIFY "JAZZWARE, 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 FIFTEENTH DAY OF NOVEMBER, A.D. 2018.



Authentication: 203909140

Date: 11-15-18