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PICK-UP	☐ WAIT	MAIL
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Office Use Only



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2018 CEC -6 FK 4: 26

K SALY DEC - / 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 514966 8121950

AUTHORIZATION :

COST LIMIT : \$ 60 00

ORDER DATE: December 5, 2018

ORDER TIME : 2:55 PM

ORDER NO. : 514966-005

CUSTOMER NO: 8121950

### <u>FOREIGN F</u>ILINGS

NAME: SHINE EARLY LEARNING, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Shive Fany Learning Trc.  Name of corporation - must include suffix
realise 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:
^ · <b>~</b>
Name of Person
Shire Early Learning Inc.  Firm/Company
Firm/Company
New York, NY 10027
Address
NewYork, NY 10027
City/State and Zip code ala) accirro. net
ala) acciero.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person  at (212)  Area Code  Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations 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 & ☐ \$78.75 Filing Fee & ☐ \$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. (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) under the law of which it is incorporated) (Date of duration, if other than perpetual) Date of incorporation) 2018 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) 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. Roxanne Turner Corporation Service Company Asst. Vice President By: (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.

•		18 DEC F/LE
1. Names and busines	ss addresses of officers and/or directors:	18 DEC
A. DIRECTORS Chairman:	HHamed (next page)	18 DEC -6 AH 7
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ice Chairman:		
irector:		
rector:		
. OFFICERS		
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ldress:		
cretary:		
dress:	· · · · · · · · · · · · · · · · · · ·	
easurer:		
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	ou may attach an addendum to the application listing additional	officers and/or directors.
	- C	
ne officer or director si c true and that he or sh	Signature of Director or Officer igning this document (and who is listed in number 11 above) affice is aware that false information submitted in a document to the provided for in s.817.155, F.S.	firms that the facts stated herein e Department of State constitutes
. A1	Escalar, CFO · Treasurer (Typed or printed name and capacity of person signing applicat	

# Board of Directors/Officers-Shine Early Learning, Inc.

### As of 3/2/17

Address for Directors/Officers: 63 W. 125th Street, 6th Fl. New York, NY 10027

Board of Directors: Aaron Lieberman – Director

Officers: Henry Wilde –President Alvaro Escobar – Treasurer Melissa Polaner, Secretary



# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SHINE EARLY LEARNING, 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 FIFTH DAY OF DECEMBER, 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 "SHINE EARLY LEARNING, INC." WAS INCORPORATED ON THE ELEVENTH DAY OF JANUARY, A.D. 2013.

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

at corp.delaware.gov/aut

Authentication: 204027417

Date: 12-05-18

5273261 8300

SR# 20187972766
You may verify this certificate online at corp.delaware.gov/authver.shtml