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DATE: 1/29/19

NAME: CATALINA CARD SERVICES INC

TYPE OF FILING: APPLICATION

COST: 87.50

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

### **COVER LETTER**

TO:	Registration Section Division of Corpora					
	CATALINA C	ARD SERVICES INC.				
SUBJ	ECT:	Name of corporat	ion - mu	st include suffix		
Dane (	Sie au Madami					
Dear 2	Sir or Madam:					
"Certi	ficate of Existence," o	oy Foreign Corporation r "Certificate of Good S rporation to transact bus	Standing <sup>*</sup>	and check are subn		
	return all correspond IONY J. ZEOLI, ESQ.	ence concerning this ma	itter to th	e following:		
		Name	of Perso	n		
FREE	BORN & PETERS LLP					
		Firm/C	Company		- 31 - 1	
311 S0	OUTH WACKER DRIV	E, SUITE 3000.				
		Ac	idress			
CHIC	AGO, ILLINOIS 60606					
		City/Sta	e and Zi	code		
AZEO	LI@FREEBORN.COM		<u></u>			
	E	-mail address: (to be us	ed for fu	ture annual report no	otification)	
For fu	rther information cond	erning this matter, plea	se call:			
ANTE	IONY J. ZEOLI, ESQ.	312	30	60-6798		
	Name of Person	at ( Area (	Code	Daytime Teleph	one 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			
Enclos	sed is a check for the t	ollowing amount:				
□ \$7	0.00 Filing Fee 🔲	\$78.75 Filing Fee & Certificate of Status		.75 Filing Fee & tified Copy	S87.50 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.

CATALINA CA	ARD SERVICES INC.				
(Enter name of co	orporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION	,,		
(If name unavaila	able in Florida, enter alternate corporate name adop	oted for the purpose of transacting	g business in Florida)		
NEVADA	3				
(State or country December 6, 20		(FEI number, if applicable)			
(Date	of incorporation)	(Date of duration, if other than perpetual)			
).					
·	(SEE SECTIONS 607.1501 & 607.1502, MOBILE, LLC, 5301 BLUE LAGOON DRIVE,  (Principal o RSON STREET, SUITE #208, CARSON CITY, N	SUITE 180, MIAMI, FLORIDA	• •		
	(Current mailing ac	ddress, if different)			
<ol> <li>Name and <u>stree</u></li> <li>Name:</li> </ol>	et address of Florida registered agent: (P.O. B REGISTERED AGENT SOLUTIONS, INC.	ox <u>NQT</u> acceptable)	2019 JAN Secret Tallaha		
Office Address:	155 OFFICE PLAZA DRIVE, SUITE A	_	29 .::Y .::SE		
	TALLAHASSEE				
	(City)	(Zip code)	8: 55 JANE JORIDI		

#### 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.

(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. DIRE								
Chairman:	PAUL SAVOIE							
Address:	c/o B-FOCUSED MOBILE, LLC, 5301 BLUE LAGOON DRIVE, SUITE 180, MIAMI, FLORIDA							
-								
	rman:							
Address:								
Director:	PAUL SAVOIE							
Address:	c/o B-FOCUSED MOBILE, LLC, 5301 BLUE LAGOON DRIVE, SUITE 180, MIAMI, FLORIDA	A 33126	<b>_</b>					
Director:	MATT GALLAHER							
	c/o B-FOCUSED MOBILE, LLC, 5301 BLUE LAGOON DRIVE, SUITE 180, MIAMI, FLORIDA							
Address:	c/o B-FOCUSED MOBILE, LLC, 5301 BLUE LAGOON DRIVE, SUITE 180, MIAMI, FLORID.							
		755 255	2019					
	sident:	<u> 2</u> 2	NAU	<u> </u>				
Address:		55 No. 1	29	<u> </u>				
Secretary	PAUL SAVOIE		<b>A</b>					
Address:	c/o B-FOCUSED MOBILE, LLC, 5301 BLUE LAGOON DRIVE, SUITE 180, MIAMI, FLORID	A 53526	ഗ					
Treasure	PAUL SAVOIE	7,						
Address:	c/o B-FOCUSED MOBILE, LLC, 5301 BLUE LAGOON DRIVE, SUITE 180, MIAMI, FLORID	A 33126						
<b>NOTE:</b> 12.	It necessary, you may attach an addendum to the application listing additional officers and	d/or dire	ctors.					
The offi are true a third d	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that the and that he or she is aware that false information submitted in a document to the Departme legree felony as provided for in s.817.155, F.S. UL SAVOIE, Chairman, President, Secretary and Treasurer							

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CATALINA CARD SERVICES INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 6, 2017, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 28, 2019.

Barbara K. Cegavske
Secretary of State

Electronic Certificate

Certificate Number: C20190128-0585