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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/9/19 1/5/

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: UP Media Group Inc Name of corporation - must include suffix				
Name of corporation - must include surfix				
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:				
Carl L. Waddell Name of Person PERSON				
Name of Person				
UP Madie Grave lac				
Firm/Company				
Firm/Company Firm/				
Address Pm 2				
Port St. Joe FL 32456 City/State and Zip code				
City/State and Zip code				
City/State and Zip code Pwcodelloupmedicagroup, Com E-mail address: (to be used for fature annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Carl Waddell at (404) 661-0349 Name of Person Area Code Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Clifton Building 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 Certificate of Status \$78.75 Filing Fee Certified Copy \$87.50 Filing Fee Certified Copy \$87.50 Filing Fee 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.

	Media Group Inc		
(Enter name of co	orporation; must include "INCORPORATED,"	"COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	orp." "Inc," "Co," or "Corp.")		
UPM	G Inc.		
(If name unavails	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Florida	ı)
2 George	under the law of which it is incorporated)	260038788. ~	
(State or count	under the law of which it is incorporated)	(FEI number, if applicatio)	_
1 01/0	7/2007	API AH	11
(Date	of incorporation)	(Date of duration, if other that perpetual)	
	1/2019	u, -≺ , ,	7-
6.	(Date first transacted business in F	Plorida if prior to registration)	=-
	(SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liability)	'۔۔
7 1003	Palm Blud Bot	St be FI 3746	_
Hom	Palm Blud Port le office) (Principal	office address)	<u>. </u>
		,	
	(Current mailing	address, if different)	
	(Current maning	address, if different)	
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
	- 1		
Name:	Carl La laled del	Ţ	
Office Address:	1003 Palm Blvd	- <u></u>	
	Part St)or_	Florida 32456	
	Port St. Joe (City)	(Zip code)	
0.5	•		

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. DIRECTORS Chairman: Address: Vice Chairman: Address: Director: **B. OFFICERS** Palm . Vice President: Address: Secretary: Seme Address: Treasurer: 50me Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Carl L. Waladdell President Owner (Typed or printed name and capacity of person signing application)

Control Number: 0202226

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

UP MEDIA GROUP, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 17109112 Date Inc/Auth/Filed: 01/07/2002 Jurisdiction : Georgia Print Date : 04/01/2019

Form Number : 211



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Brad Raffonsperger

Brad Raffensperger Secretary of State