(Re	questor's Name)	
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CHARTACH

B KINSEY MAY 3 - 2019 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 746752 7620452

AUTHORIZATION :

COST LIMIT : \$ 1020.00

ORDER DATE: May 1, 2019

ORDER TIME : 9:55 AM

ORDER NO. : 746752-030

CUSTOMER NO: 7620452

FOREIGN FILINGS

NAME: INDIGOVISION, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

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.

		opted for the purpose of transacting business in Florida)	_
Delaware -	3	4-3342162	_
01/21/2004	ry under the law of which it is incorporated) 5 5	(FEI number, if applicable) (Date of duration, if other than perpetual)	_
	e of incorporation)	(Date of duration, if other than perpetual)	
100 D	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)		_
·	Orive, Bloomfield, NJ 07003-3153		_
	(Principal	office address)	
	(Current mailing	address, if different)	-
	(Curen mann)	address. If officienty	
. Name and stre	et address of Florida registered agent: (P.O.	Box NOT acceptable)	(S)
	Corporation Service Company		.क }}
Name:	e or potation out the company		
Name:	1201 Hays Street		: }
Name:	1201 Hays Street Tallahassee		5
Office Address:	Tallahassee	The state of process for the above stated corporation at the cent as registered agent and agree to act in this cap	6 15 d C - 3

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: _____ Vice Chairman: Address: _____ Director: __ Address: ______ Director: **B. OFFICERS** Pedro Mimoes President: Charles Darwin House, Milton Bridge, Edinburgh, UK EH26 OPY Address: Vice President: Christopher Lea Secretary: Charles Darwin House, Milton Bridge, Edinburgh, UK EH26 OPY Address: Christopher Lea Treasurer: Charles Darwin House, Milton Bridge, Edinburgh, UK EH26 OPY 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.

Christopher Lea. Secretary



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

DELAWARE, DO HEREBY CERTIFY "INDIGOVISION, 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 FIRST DAY OF MAY, A.D. 2019.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INDIGOVISION, INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF JANUARY, A.D. 2004.

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

Authentication: 202743894

Date: 05-01-19