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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Zhyno Inc.				
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COVER LETTER

TO:	Registration Section Division of Corporations						
	Zhyno Inc.						
SUBJ	IECT:						
	ran	ne of corporatio	n - must	nclude suffix			
Dear S	Sir or Madam:						
"Certi	nclosed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation t	ate of Good Sta	nding" ai	nd check are sut	ict Bus. omitted	iness in Florida," to register the	
	return all correspondence conce Cohen, Esq.	rning this matte	er to the f	allowing:			
		Name of	Person				
Becke	r & Poliakoff P.A.						
		Firm/Cor	npany				
l East	Broward Blvd., Suite 1800						
		Addi	ess		· · · · =		
Fort L	auderdale, FL 33301						
		City/State	and Zip c	ode			
acohe	n@beckerlawyers.com						
	E-mail addr	ess: (to be used	for futur	e annual report	notifica	ition)	
For fu	rther information concerning this	matter, please	call:				
Adam Cohen 954			987-7550				
		at (
	Name of Person	Area Coo	ie .	Daytime Telep	hone N	lumber	
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 following a	inount:					
X \$70	0.00 Filing Fee	ling Fee & (e of Status		Filing Fee & ed 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 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. Zhyno Inc. 1. (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) 38-4006206 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 15072 SW 176th St., Miami, FL 33187 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Adam Cohen, Esq., c/o Becker & Poliakoff PA Name: I East Broward Blvd., Suite 1800 Office Address: Fort Lauderdale _ , Florida , (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.

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: Address: Address: Director: ___ B. OFFICERS Liliana Ramirez President: 15072 SW 176th St., Miami, FL 33187 Address: ___ Vice President: Address: Secretary: _ Address: ___ Treasurer: NOTE: If necessary, you may attach an addendum to the lipid calion 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.\$17.155, F.S.

12. _____

Liliana Ramirez, Officer 7.

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ZHYNO 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 TWENTY-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 "ZHYNO INC." WAS INCORPORATED ON THE NINTH DAY OF JUNE, A.D. 2016.

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

Authentication: 202869943

Date: 05-21-19