

То	Page	3 of 5	

19542080845 From Ranae McGraw

APPLICA	FION BY FOREIGN CORPORATIO BUSINESS IN		ION TO TRA	NSACT
IN COMPLIANCE REGISTER A FOR Cor Wellness Ho 1.	WITH SECTION 607.1503, FLORIDA STA EIGN CORPORATION TO TRANSACT BU Idings, Inc	TUTES, THE FOLLOWING SINESS IN THE STATE OF	G IS SUBMITTE. F FLORIDA.	Ο Τ [΄] Ο
(Enter name of co	rporation; must include "INCORPORATED," * rp," "Inc." "Co." or "Corp.")	COMPANY," "CORPORAT	'ION,"	
· · ·				
(If mane unavaila Delaware	ble in Florida, enter alternate corporate name ad	opted for the purpose of transi	acting business in I	'lorida)
2. (State or country hune 4, 2019	3 y under the law of which it is incorporated)	(FEI number,	f applicable)	
(Date June 4, 2019 6. 	of incorporation) (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150 ac. Suite 2000			(<u>)</u>
/. <u></u>	. (Ргілсіра	l office address)		1
	(Current mailing	address, if different)		• •
	t address of Florida registered agent: (P.O. Michael Kliska	Box <u>NOT</u> acceptable)	1: 39 1: 39	·
		·		
 Name and <u>stree</u> Name: Office Address: 	333 SE 2nd Avenue, Suite 2000	~ .		
Name:	333 SE 2nd Avenue, Suite 2000 Miami (City)	33131 , Florida (Zip code)		•

Having been named as registered agent and to accept service of process for the above faced corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. 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.

To: Page 4 of 5

• •

19542080845 From Ranae McGraw

• •	es and business addresses of officers and/or directors:	
	CTORS Michael Kliska	
Chairman: Address:	333 SF 2nd Avenue, Saite 2000 Miami, 17, 33131	
·		
Vice Chai	man:	
Address:		
	David Moore	· · · · · · · · · · · · · · · · · · ·
Director:	333 SE 2nd Avenue, Suite 2000 Miami, FL 33131	
/1007685.		
Director:	× · · · · · · · · · · · · · · · · · · ·	
Address:		
B ₁ OFF	Michael Kliska	
President:	333 SE 2nd Avenue, Suite 2000 Miami, FL 33131	
		<u>ل</u>
Vice Pres	ident:	
Address:		
	Michael Kliska	· · · · · · · · · · · · · · · · · · ·
Secretary	333 SE 2nd Avenue, Suite 2000	
Address: Treasurer	Miami, FL 33131 Michael Kliske	·····
•	333 SE 2nd Avenue, Suite 2000 Miami, FL 33131	
NOTE:	If necessary, you may attach an addendum to the application listi	ing additional officers and/or directors.
12	Signature of Director or Offic	
are true a	cer or director signing this document (and who is listed in numbe and that he or she is aware that false information submitted in a d	r 11 above) affirms that the facts stated herein
	egree felony as provided for in s.817.155, F.S. thad Kliska Michael Kliska.	CEO
·	(Typed or printed name and capacity of person si	gning application)
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COR WELLNESS HOLDINGS, 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 JULY, A.D. 2019.

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





Authentication: 203136213 Date: 07-01-19

7452048 8300 SR# 20195756190

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