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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUPERBIZ.COM, INC.

Account Number : I20070000160 Phone : (800)494-3124 Fax Number : (305)675-2811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION CEDARCREEK SYSTEMS INC.

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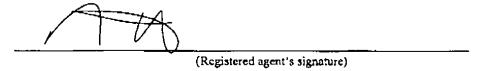


APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA H19000226458 3

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.

	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION	N ,"	
(If name unavai	lable in Florida, enter alternate corporate name a NA 3,	45-4286576	ng business in Florida)	
(State or country under the law of which it is incorporated) DECEMBER 19, 2011		(FEI number, if applicable)		
(Dat	e of incorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)	
5.5 (*) 6/(0)		RIITA 134III		
	,	al office address)		
	(Princip	al office address) g address, if different)	2019 JUL 29	
Name:	(Princip (Current mailin et address of Florida registered agent: (P.C	al office address) g address, if different)	29	
	(Princip (Current mailin et address of Florida registered agent: (P.C	al office address) g address, if different)	2	

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.

11. Names and business addresses of officers and/or directors:					
A. DIRECTORS	H19000226458 3				
Chairman:					
Address:					
Vice Chairman:					
Address:					
Director:					
Address:					
Director:					
Address:					
B. OFFICERS					
President:NICHOLAS WILHELM	2019				
Address:515 N FLAGER DRIVE #304, WEST PALM BEACH, FLORIDA 33401					
	№				
Vice President:	= 177				
Address:	و ج				
	50				
Secretary:					
Address:					
Treasurer:					
Address:					
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.					
12.					
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.

NICHOLAS WILLIELM, PRESIDENT

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State of California Secretary of State

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CERTIFICATE OF STATUS

ENTITY NAME:

CEDARCREEK SYSTEMS INC.

FILE NUMBER:

C3434118

FORMATION DATE:

12/19/2011

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 26, 2019.

ALEX PADILLA Secretary of State

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