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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (855)330-1010

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

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### FOREIGN PROFIT/NONPROFIT CORPORATION

#### **Ayima Incorporated**

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BKINSEY AUG 12 7019

## 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.

-10		a adopted for the appropriate	a business in F	lorida)	
(If name unavai	able in Florida, enter alternate corporate nam	ie adopted for the purpose of transacting	g business in r	ionua)	
Oelaware 3. (FEI number, if applied (FEI number).			olicable)	icable)	
			,		
. 5/11/2012 (Dat	e of incorporation)	5. Perpetual (Date of duration, if other	ration, if other than perpetual)		
	·				
·	(SEE SECTIONS 607.1501 & 607	in Florida, if prior to registration) 1502, F.S., to determine penalty liabili	 1y)		
270 Lalayette St	reel, Suite 1406 New York NY 10012	cipal office address)	<u> </u>		
	() ( ) ( )	eijnit (nitice address)			
	(Current ma	iling address, if different)			
i. Name and stro	(Current ma tet address of Florida registered agent: (I Northwest Registered Agent LLC		57.	2019 AUG	
Name:	ect address of Florida registered agent: (I		₹1. E1	2019 AUG - 9	
Name:	ect address of Florida registered agent: ()			-9	
Name:	Northwest Registered Agent LLC  7901 4th St N STE 300  St. Petersburg	P.O. Box NOT acceptable)  , Florida 33702		-9	
Name:	Northwest Registered Agent LLC 7901 4th St N STE 300	P.O. Box <u>NOT</u> acceptable)		1	
Name: Office Address:  Office Address:  Office Address:  Hegistered application of the signated in the further agree to	Northwest Registered Agent LLC  7901 4th St N STE 300  St. Petersburg  (City)  gent's acceptance: med as registered agent and to accept se is application, I hereby accept the appoint comply with the provisions of all statute	P.O. Box NOT acceptable)  The process for the above state at the state	ree to act in th ete performai	-9 AH 9:57 m at the plais capaci	
Name: Office Address:  Office Address:  Office Address:  Office Address:  Having been name of the signated in the further agree to	Northwest Registered Agent LLC  7901 4th St N STE 300  St. Petersburg  (City)  gent's acceptance: ned as registered agent and to accept se is application, I hereby accept the appoint	P.O. Box NOT acceptable)  The process for the above state at the state	ree to act in th ete performat t.	-9 AH 9:57 m at the plais capaci	

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. DIRI	ECTORS			
Chairman	Michael Jacobson			· · · · · · · · · · · · · · · · ·
Address:	7901 4th St N STE 300			
,	St. Petersburg FL 33702		_	
Director:	Michael Nott			
Address:	7901 4th St N STE 300			
	St. Petersburg FL 33702			
Director:	Michael Jacobson		.,	
Address:	7901 4Ih SI N STE 300	·		
	St. Petersburg FL 33702			
Director:	Timothy Webb			
	7901 4th St N STE 300			
	St. Petersburg FL 33702			
B. OFF	TICERS		2	
President	. Michael Jacobson	Ţ.	2019 AUG	
	7901 4th St N STE 300		<u>  [5</u>	
	St. Petersburg FL 33702	3	-6	L. Sanda
Vice Pres	sident:	; [7]	7	(° 5 ° 3
		<u> </u>	्र क	
7 COLORE SA		•,	1	
Secretary	. Michael Nott			
	7901 4th St N STE 300 St. Petersburg FL 33702			
	r: Michelle Dempsey			
	7901 4th St N STE 300 St. Petersburg FL 33702			
NOTE:  12  The offi are true a third d	If necessary, you may attach an addendum to the application listing additional office Michalle Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms and that he or she is aware that false information submitted in a document to the Deplegree felony as provided for in s.817,155, F.S. chelle Dempsey, Treasurer	that the fac	is stated	herein astitutes

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "AYIMA INCORPORATED" 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 SEVENTH DAY OF AUGUST, 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 "AYIMA INCORPORATED" WAS INCORPORATED ON THE ELEVENTH DAY OF MAY, A.D. 2012.

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

at corp delaware gov/auti

Authentication: 203367953

Date: 08-07-19