F190000308

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
<u> </u>
· Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

215,

REFERENCE : 895714 _ 8177981

AUTHORIZATION : Sould le par

ACCOUNT NO. : I2000000195

COST LIMIT : \$ 70.00

ORDER DATE : August 23, 2019

ORDER TIME : 1:14 PM

ORDER NO. : 895714-005

CUSTOMER NO: 8177981

FOREIGN FILINGS

NAME: CLARIANCE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: _____

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Clariance, Inc. Name of corporation	- must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standabove referenced foreign corporation to transact business	ding" and check are submitted to register the
Please return all correspondence concerning this matter Tenna Dalgety Name of P	to the following:
Name of P	Person : G
Clariance, Inc.	23 !
Clariance, Inc. 4809 N. Rovenswood Ave Address	Dany : : : : : : : : : : : : : : : : : : :
Chicago, Il. 60640	,
City/State and	fine . US report notification)
For further information concerning this matter, please ca	ali:
Name of Person at (73) Area Code	Daytime Telephone Number
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
Enclosed is a check for the following amount:	
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ Certificate of Status	\$78.75 Filing Fee &

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. (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) (State or country under the law of which it is incorporated)

3. 99-0375653

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (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. Corporation Service Coppany
By: Lydia Cohen (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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS		
Chairman:		
Address:		
Vice Chairman:		
Address:		
Director: Alaia Tornier		
Address: 4809 N. Ravenswood Ave., #119 (Licago, Il. 60640		
Director: Thierry Manceau	75. Zel	
Address: 4809 N. Pavenswood Ave. F119 Chicago IL. 60640	ALG 2	
B. OFFICERS	70	
President: Sylvain Chambat		
Address: 4809 N. Raverswood Ave. F119 Chicago, Il. 60640)	
Vice President:		
Address:		
Secretary: Sylvain Chambat Address: 4809 N. Ravensplood Ave. # 119 (1		
Address: 4809 N. Ravensplood Ave. # 119 (sicage, II.	60640
Treasurer:		
NOTE: If necessary, you may attach an addendum to the application listing additional	officers and/or direct	ors.
12. Signature of Director or Officer		
The officer or director signing this document (and who is listed in number 11 above) at are true and that he or she is aware that false information submitted in a document to the athird degree felony as provided for in s.817.155, F.S.		
13. SYCUPTIO CHANGOT CEO (Typed or printed name and capacity of person signing applica	ation)	

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CLARIANCE, 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-THIRD 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 "CLARIANCE, INC."

WAS INCORPORATED ON THE FOURTH DAY OF APRIL, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE

5 C3 PM 4: 37

Authentication: 203464720

Date: 08-23-19