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(((H19000256749 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: INCORP SERVICES INC Account Name

Account Number : I20120000007

: (702)866-2500

Fax Number

: (702)866-2689

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

Email Address: documents@incorp.com

# FOREIGN PROFIT/NONPROFIT CORPORATION

Krauthammer International USA Inc.

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Y SCOTT

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#### **COVER LETTER**

Division of Corporation		ner Interno	ntional USA Ir	nc	
SUBJECT:				<del></del>	
	Name of corporat	ion - musi i	nciude suttix	Ξ1,	12
Dear Sir or Madam:				1-1-1	(C)
The enclosed "Application by Fo "Certificate of Existence," or "C above referenced foreign corpora	ertificate of Good S	tanding" a	nd check are si	act Bus ibmitted	ilness'in Florida," I to register the
Please return all correspondence	concerning this ma	itter to the f	ollowing:	Ţ.,	====
•		Fernandez		1	
	Name	of Person		:	-
,	InCorp Se	esvices, Inc.		•	
	Firm√C	ompany			
37	3 Howard Hughe	s Parkway	Suite 500S		
· · · · · · · · · · · · · · · · · · ·	Ac	idress			
	Las Vegas, N	IV 89169-4	5014		
	City/Stat	e and Zip c	ode		
	documents			_	
E-ma	address: (to be us	ed for futur	e annual repor	t notific	ation)
For further information concerni	ng this matter, pleas	se call:			
Joanna Fernand InCorp Service		2 ) 864	6-2500		
Name of Person	Area C	ode	Daytime Tele	phone !	Number
STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301 Enclosed is a check for the follor	ircle		MAILING Registration Division of 0 P.O. Box 63 Tallahassee,	Section Corpors 27	n ations
■ \$70.00 Filing Fee □ \$78	75 Filing Fee & tifficate of Status		5 Filing Fee & ied Copy	0	\$87.50 Filing Fee, Certificate of Statu Certified Copy

(H19000256749 3]

# 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.

	International USA Inc.			
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	'," "COMPANY," "CORPO	RATION,"	
(If name unavaile	able in Florida, enter alternate corporate name	adopted for the purpose of t	eesniesid godanemmi	in Florida)
2 Georgia	3			<u>7.1                                    </u>
(State or country	y under the law of which it is incorporated)	(FEI num	iber, if applicable)	<u>.</u> .
<sub>4</sub> 5/19/2000	5	Perpetual	<i>ि</i>	0,
(Date	of incorporation)	incorporation) (Date of duration, if other than perpetual)		₩.
6 Upon registrat	tion			五·4 ————————————————————————————————————
··· -	(Date first transacted business (SEE SECTIONS 607.1501 & 607.	in Plorida, if prior to registra 1502, F.S., to determine pens	ition) ilty (iability)	٠٠.
5901 Peachli	ee Dunwoody Rd Ste A-425, Atlanta		<u> </u>	
7		ipal office address)	<u> </u>	
	·	•		
	(Current mail	ing address, if different)		<del>_</del>
	·			
8. Name and stres	et address of Florida registered agent: (P	.O. Box <u>NOT</u> acceptable)	)	
Name:	InCorp Services, Inc.			
Office Address:	17888 67th Court North	<del></del>		
Office Address.	Loxahatchee	, Florida 33470		•
	(City)	(Zip coc	le)	
9. Registered age	ent's neceptance: ed as registered agent and to accept ser	vice of process for the abo	ove stated corport	ation at the place
declorated in this	application. I hereby accept the appoint	tment as registered agent	and agree to act	in this capacity.
further agree to c	omply with the provisions of all statutes amiliar with and accept the obligations	relative to the proper and of my position as register	d compl <b>ete</b> perfor red avent.	mance of my
auties, and I am j	amiliar with and accept the obligations	oj my posmon as reguner	ra approx	
	1 1 1	<ul> <li>Joanna Fernandez</li> </ul>	on behalf of	
	Munum Musmid 195	InCorp Services, Inc	c	
. 7	Registered	l agent's signature)	<del></del> -	

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.

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11. Names and b	usiness addresses of officers and/or directors:	
A. DIRECTOR	S	
Chairman;		
Address:		
Vice Chairman:		
Address:	4	<u> </u>
	<u> </u>	R.C.
		iv. C.
		<u> </u>
		7.
Address:		
B. OFFICERS		
	omas Romijn	
50	901 Peachtree Dunwoody Rd Ste A-425, Atlanta GA, 30328	
Address:		
Addross:		<del></del>
	imberly Moorehead	
Address:	901 Peachtree Dunwoody Rd Ste A-425, Atlanta GA, 30328	
Treasurer:		·
Address:		<del></del>
NOTE: If necess	ary, you may attach an addendum to the application listing additional c	officers and/or directors.
12. War	Signature of Director or Officer	
The officer or dire	ector signifig this document (and who is listed in number 11 above) affi	irms that the facts stated herein
are true and that he third degree feld	e or she is aware that false information submitted in a document to the my as provided for in s.817.155, F.S.	Department of State constitutes
	orehead. Secretary	

(Typed or printed name and capacity of person signing application)

(H19000256749 3)

Control Number: 0023628

### STATE OF GEORGIA

## Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE .....

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### KRAUTHAMMER INTERNATIONAL USA INC.

B Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in-Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docker Number : 17376956
Date Inc/Auth/Filed: 05/19/2000
Jurisdiction : Georgia
Print Date : 06/11/2019
Form Number : 211



Bred Raffersperger

Brad Raffensperger