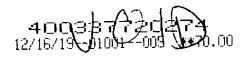
FPOWS43

(Re	equestor's Name)	
(Ad	dress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	⊋ #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		J

Office Use Only



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2019 DEC - 6 ATTI: 10

T GLASS DEC 0 9 2019

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 12/6/2019	<u> </u>	**WA1.	K [N##
ENTITY NAME VIVA	FINANCE INC.	**************************************	
DOCUMENT NUMBER			
	PLEASE FILE THE ATTACHED AND RETURN		
XXXX	Plain Copy Certified Copy Certificate of Status		
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	2019 DEC -	
	Certified Copy of Arts & Amendments Certificate of Good Standing	:111.4	- 1
	APOSTILLE' / NOTARIAL CERTIFICATION	0	
COUNTRY OF DESTIN NUMBER OF CERTIFIC	ATION		
TOTAL OWED 70.00	СНЕСК # <u>6999</u>	_	
Please call Tina at	the above number for any issues or concerns. Thank you so	o much!	

COVER LETTER

TO: Registration Section Division of Corpor						
SUBJECT: Viva Finance						
SUBJECT:	Name of corpo	ration -	must include suffix			
Dear Sir or Madam:						
The enclosed "Application "Certificate of Existence," above referenced foreign co	or "Certificate of Good	l Stand	ing" and check are sul	et Business in Flo bmitted to register	rida." the	
Please return all correspond	lence concerning this r	iaiter te	the following:			
Roy Markwalter						
···	Nan	ie of Pe	erson			
Viva Finance Inc.						
· · · · · ·	Firm	/Comp	nny			
1447 Peachtree Street NW, Si	nite 700					
		Address	3	· · · · · · · · · · · · · · · · · · ·		
Atlanta, GA 30309						
	City/Si	ate and	Zip code			
hodges@viva-finance.com					201	
	E-mailraddress::(to-be-c	ised for	future annual report	notitication)	\# -	
For further information con	cerning this matter, ple	ase cal	1:		2011) DEC -6	
Rov Markwalter	404 at i		803-2598			1 .
Name of Person	 _ '	Code	Daytime Telep	hone Number	01:1157	
STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n itions nter Circle		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		
Enclosed is a check for the	following amount:					
☐ \$70.00 Filing Fee ☐	\$78.75 Filing Fee & Certificate of Status		678.75 Filing Fee & Certified Copy	S87.50 Filing Certificate of Certified Co	of Status &	

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

Viva Finance I			
(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," " 'orp," "Inc," "Co," or "Corp,")	COMPANY," "CORPORATION,"	
Viva Finance (`orp		
(If name unavail	able in Florida, enter alternate corporate name ad-	opted for the purpose of transacting business in Florida)	
Delaware	3. 8	84-1763110	
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)	
04/15/2019	5	Perpetual	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
No prior busine	ess in FL		
1447 Peachtree S	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 treet NE, Suite 700, Atlanta, GA 30309		
	(, , , , , , , , , , , , , , , , , , ,		
	(Current mailing	address, if different)	
Name and stree	et address of Florida registered agent: (P.O. I NRAI Services, Inc	Box NOT acceptable)	
fice Address.	1200 South Pine Island Road	। ਹ	
	Plantation	. Florida <u>33324</u>	
	(City)	(Zip code)	

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.

Patricia A. Boverie, Asst. Servetary

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: ___ Vice Chairman: Address: Director: John Manuager Address. 1447 Peachine Sweet NE State 700 Atlanta GA 30309 Director: Roy Mark Asher Address: 1447 Peachines Street NE. State 200, Attanta. GA 30309 **B. OFFICERS** President: John Markwater Address: 1447 Punchine Street NE, Suite 700 Atlanta GA 30309 Vice President Address Secretary: Roy Markwatter Address: 1447 Peachtree Street NE State 700, Adanta, GA 30309 Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

Roy Hodges Markwalter

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "VIVA FINANCE 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 SIXTH DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VIVA FINANCE INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF APRIL, A.D. 2019.

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

2019 DEC - 6 ATTH: 10

Authentication: 204153516

Date: 12-06-19