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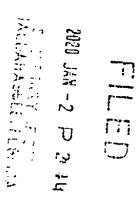
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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ecial Instructions to Filing Officer:				
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Office Use Only



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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
CUDI	EBRAND, INC.		
SUBJ		- must include suffix	<u> </u>
Dear S	ir or Madam:		
"Certif	closed "Application by Foreign Corporation for icate of Existence," or "Certificate of Good State ferenced foreign corporation to transact business.	iding" and check are subn	
	return all correspondence concerning this matter Abughazaleh	r to the following:	
	Name of	Person	•
EBRA	ND, INC.		
	Firm/Con	npany	
<u>-801-S</u> -	mh Miani Ammer Wit 2501 3131 NE	7th AVF	UNIT \$ 4103
	Addr	<del>-                                    </del>	
Miami.	FL====================================		
	City/State a	nd Zip code	
hazem(	@ebrandworldwide.com		
	E-mail address: (to be used	for future annual report no	otification)
For fur	ther information concerning this matter, please	cail:	
Hazem Abughazaleh		350 88°	16
	Name of Person Area Cod	e Daytime Telepho	one 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	
Enclos	ed is a check for the following amount:		
<b>□</b> \$70	.00 Filing Fee S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

OMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO

ISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. BRAND, INC. nter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," ic.," "Co.," "Corp," "Inc," "Co," or "Corp.") BRAND WORLDWIDE, INC. name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) [D State or country under the law of which it is incorporated) (FEI number, if applicable) 11/2017 (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) South Miami Avenue, Unit 2501, Miami, FL 33130 (Principal office address) (Current mailing address, if different) ame and street address of Florida registered agent: (P.O. Box NOT acceptable) Hazem Abughazaleh Name: e Address: Miami (City) egistered agent's acceptance: ng been named as registered agent and to accept service of process for the above stated corporation at the place nated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I er agree to comply with the provisions of all statutes relative to the proper and complete performance of my s, and I am familiar with and accept the obligations of my position as registered agent.

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to repartment of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction the law of which it is incorporated.

istered agent's signature)

James and business addresses of officers and/or directors:
IRECTORS
Hazem Abughazaleh nan:
-801 South Miami Avenue, Unit 2501 3131 NE 7th Ave Unit 4103
Miami, FL 39139 33/37
Laila Alshawwa Chairman:
801 South Miami Avenue, Unit 2501 313) NE 7th Ave. Unit 4103
Miami, FL 33137
Matthew Journy or:
200 Franklin Avenue
Silver Spring, MD 20901
or:
SS:
<del></del>
FFICERS
Hazem Abughazaleh ent:
ss: BOT South Miami Avenue, Unit 2501 3131 NE 7th Ave, Unit 4103
Miami, FL-39138 33 37
Laila Alshawwa
ss: ROL South Minumi Avenue, Unit 2501 3131 NE 7th Ave Whit 4103
Miami, FL 33130 3312
Laila Alshawwa
ss: Hazem Abughazaleh Miamt Avenue, Unit 2501, Miamt, FL 33130 313 NE 7 <sup>th</sup> Ave, Unit 4(0)
Hazem Abughazaleh  Micmi, FL 33/37  arer:
ss: 801 South Miami Avenue, Unit 2501, Miami, FL 33130-3131 NE 7th Ave, Unit 4103, Miami, FL 33130-
E: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Signature of Director or Officer
officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein ue and that he or she is aware that false information submitted in a document to the Department of State constitutes d degree felony as provided for in s.817.155, F.S.
Hazem Abughazaleh
(Typed or printed name and capacity of person signing application)

## STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT EBRAND, INC. (D18259085), INCORPORATED SEPTEMBER 11, 2017, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION. AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 13, 2019.

Michael L. Higgs

Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

Online Certificate Authentication Code: p56EaaJclE6zzQSVXMFwKQ To verify the Authentication Code, visit http://dat.maryland.gov/verify