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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

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## FOREIGN PROFIT/NONPROFIT CORPORATION SILENTIA INC.

Certificate of Status	0
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## 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 co "Inc.," "Co.," "Co	rporation; must include "INCORPORATED," " rp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATIO	N,"	
Thelessana	ole in Florida, enter alternate corporate name add	-1588927		
	under the law of which it is incorporated)  5			
(Date April 6, 2020	of incorporation) 5.	(Date of duration, if othe	r than perpetual)	
	nie, Suite 105, King of Prussia, PA 19406	office address)		<u>-</u>
	(Current mailing taddress of Florida registered agent: (P.O.	address, if different)  Box NOT acceptable)	APR APR - 1	
Name:	C T Corporation System	<del></del>		-
Office Address:	1200 South Pine Island Road	<del></del>		<b>\</b>
	Plantation,	33324 , Florida		
	(City)	(Zip code)		
laving been nan lesignated in this wriber agree to t	ent's acceptance:  sed as registered agent and to accept service application, I hereby accept the appointm comply with the provisions of all statutes re familiar with and accept the obligations of	ent as registered agent and a lative to the proper and comp	gree to act in this cap plete performance of t	แตกว

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.

(Registered agent's signature)

By: CYUMHILL - Christine Kelm, Assistant Secretary

To: Page 4 of 5

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
Address.
B. OFFICERS Dag Goranson
President: 1004 W. 9th Avenue, Ste 105, King of Prussia, PA 19406 Address:
Address:
Vice President:
Address:
Tim Geranson
Secretary: 1004 W. 9th Avenue, Ste 105, King of Prussia, PA 19406
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. 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.
Tim Goranson, Secretary, Silentia Inc.  13.  (Typed or printed name and capacity of person signing application)
(1) ped of printed name and capacity of person signing approximation)



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SILENTIA 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 APRIL, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202722685

Date: 04-06-20