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То:	Division of Corporations Fax Number : (850)617-6383	RY OF STAT	3 PH 4:	
From:	Account Name : CORPORATION SERVICE COMPANY	D'III	2	

Phone : (850)521-0821 Fax Number : (850)558-1515

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

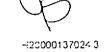
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FOREIGN PROFIT/NONPROFIT CORPORATION TMFL CONSULTANTS, INC.

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSAGT 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.

ss of Florida registered agent: (P.O. Lee 4 Kilmarnock Drive ni Lakes	
Lee	
<u>ss</u> of Florida registered agent: $(P.O.$. Box <u>svor</u> acceptable)
on it is to the	Roy NOT acceptable)
(Current mailing	g address, if different)
(Principal offic	e <u>street</u> address)
5044 Miami Lakes, FL 33014	
(ORIS BROTTOTAL CONTINUE OF CONTINUE	Florida, if prior to registration) 22, F.S., to determine penalty liability)
poration)	• • • • • • • • • • • • • • • • • • • •
the law of which it is incorporated)	(FEI number, if applicable).
	20 3
	5044 Miami Lakes, FL 33014 (Principal offic (Current mailing

Troy Lee (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.

s.\$17.155, F.S.

A. DIRECTORS				H20000137024 3		
Chairman	Name:	□Chairman	Name:			
□ Vice Chairman	Address: 5375 NW 159th St., Suite 5044	□Vice Chairman	Address:			
■ Director	Miami Lakes, FL 33014	□Director				
□President		□President				
□Vice President	<u></u>	□Vice President				
Secretary	☐ Treasurer	□Secretary	ALL	Stream III		
Other		□Other		Other C		
			č r			
□Chanman	Name:	□Сһаитап	Name.			
□ Vice Chairman	Address:	□Vice Chairman	Address:	<u> </u>		
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□ Secretary	Treasurer	□Secretary		□Treasuter		
Other	Other	Other	 	□Other		
□Chairman	Name:	□Chauman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□ Vice President		□Vice President				
□ Secretary	Treasurer	☐ Secretary		☐Treasurer		
Other		□Other		□Other		
Important Notice Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Signature of Director or Officer						

Troy Lee, Director

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

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TMFL CONSULTANTS, 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 SEVENTH DAY OF MAY, A.D. 12020 AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS BEEN FILED TO DATE.

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

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

Authentication: 202891569

Date: 05-07-20