## 10/23

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name ; LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

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

Email Address:\_

## FOREIGN PROFIT/NONPROFIT CORPORATIO TGRC INC.

Certificate of Status	0
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Page 1

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

DELAWARE, DO HEREBY CERTIFY "TGRC 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 SECOND DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TGRC INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF JUNE, A.D. 2020.

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

Authentication: 203583936

Date: 09-02-20

TO: Registration Section

Division of Corporations

## COVER LETTER

SUBJECT: TGR	IC INC.				
	Name of	corporation	ı - must i	nclude suffix	
Dear Sir or Madam	1:				
"Certificate of Exis	olication by Foreign Corp stence," or "Certificate of oreign corporation to tran	Good Star	iding" ar	id check are subi	t Business in Florida," nitted to register the
Please return all co	mespondence concerning	this matter	r to the fe	ollowing:	
Cheyenne Moseley					
		Name of	Person	·	
Legalzoom.com, inc				_	
		Firm/Con	прапу		
101 N Brand Blvd I	tth Fl				
		Addr	ess		
Glendale, CA 91203	3				
	(	City/State a	ind Zip c	ode	
cecilia@globalcorps					
	E-mail address: (	to be used	for futur	e annual report n	otification)
For further informa	ation concerning this mat	ter, please	call:		
Cheyenne Moseley	pi	K00 Area Coo	773-	0888	
Name of f	Person	Area Coo	le	Daytime Telepl	none Number
Registration Division on The Centrol 2415 N. M	COURIER ADDRESS: on Section of Corporations to of Tallahassee donroe Street, Suite \$10 te, FL 32303			MAILING A Registration S Division of Co P.O. Box 6321 Tallahassee, F	ection orporations 7
Please make check p	k for the following amound by	ARTMEN Fee &(	S78.7:	ATE 5 Filing Fee & ied Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

## 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.

1. TGRC INC.

(Enter name of corporation; must include "INCORPORATED." "COMPANY," "CORPORATION."

(If name anavail	ible in Florida, enter alternate corporate nam	e adopted for the purpose of trans-	acting business in Florid	
Delaware	3	851620781		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
6/22/2020	5	5		
(Dute of incorporation)		(Date of duration, if other than perpetual)		
08/03/2020			. <u></u>	
		1502 F.S. to determine negality li	ability)	
	(Principal o ke Road Suite 500 Orlando, FL 32819	.1502. F.S., to determine penalty li	<b>202</b>	
7380 W Sand La	(Principal o ke Road Suite 500 Orlando, FL 32819	ffice <u>street</u> address) ling address, if different)	MAIL HARSON A	
7380 W Sand La	(Principal of Road Suite 500 Orlando, FL 32819)  (Refincipal of Road Suite 500 Orlando, FL 32819)  (Current mail of address of Florida registered agent: (P	ffice <u>street</u> address) ling address, if different)	SELL MARKSTON	

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.

(City)

Sean Goldenberg

(Zip code)

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.

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS	Cecilia Gatus		Daniel	Smart	
□Chairman	Name: Cecilia Gatus	Chainnan	Name:		
□Vice Charman		DVice Chairman	Address:		
Director	2305 Historic Decatur Road Suite 100	Director	Middletown, DE 19709		
<b>₽</b> President	San Diego, CA 92106	☐ President	Middletown, I	)r. 19709 	
ElVice President		□Vice President			
<b>U</b> Secretary	Treasurer	☐ Secretary		☐Treasmer	
[]Other	□ Other	□Other		□Other	
	Cecilia Galus				
□Chaimian	Name:	□Choirman	Name:		
□ Vice Chairman	Address:	□Vice Chairman	Address:		
Director	2305 Historic Decatur Road Suite 100	□Director			
□President	San Diego, CA 92106	□President			
□Vice President		□Vice President			
<b>≣</b> Secretary	☐ Treasurer	Secretary		Treasurer	
□Other	□Other	Other		Other	
	Cecilia Gatus	□Chainnan	Nume		
Chairman		□Vice Chainnan			
□Vice Chainnan	Address:	_			
Director	San Diego, CA 92106	Director			
□President		□ President			
□Vice President		Ovice President			
Secretary	<b>■</b> Treesurer	Secretary		☐ Treasurer	
□Other	Other	Other	<del></del>	Other	
Important Notice: individuals may be	Use an attachment to report more than six (6). The see added to the index when filing your Harida Departure of the	iment of State Annual R	cport form.		
The officer or dire she is aware that fi s.817.155, F.S.  President	etor signing this document (and who is listed in nuralse information submitted in a document to the Dep	nber 11 above) affirms t	hat the facts state	ed herein are true and that he o	
13.	(Typed or printed name and capacity of p	erson signing applicatio	n)		