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## **COVER LETTER**

	Registration Se Division of Co					
SUBJE	ect: Fi	ELMATA	MUSIC	- MC -		
		Name o	f corporation	- must include suffix		
Dear Sir	r or Madam:					
"Certific	cate of Existen	tion by Foreign Corce," or "Certificate of grant to train	of Good Stan	ding" and check are sub	ct Business in Florida," mitted to register the	
Please r	eturn all corres	pondence concernit	ng this matter	to the following:		
	<u>JFF</u>	FRY SEU	Name of I	Person		
	JEF,	FMY SEID	CPA hiem/Com	Person	<del></del>	<del></del>
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		E-mail address:	(to be used f	or future annual report i	notification)	
For furtl	her information	concerning this ma	atter, please c	alf:		
	JEFF S	SEID	at ( <u>90\$</u>		001	
	Name of Perso	on	Area Code	Daytime Telep	hone Number	
	Registration Se Division of Co The Centre of	rporations Tallahassee oe Street, Suite 810		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	section orporations 7	
Please m	d is a check for ake check payab 90 Filing Fee	the following amo de to: FLORIDA DE S78.75 Filing Certificate o	PARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate of State Certified Copy	ıs &

## 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.

(It name unavailable i	n Florida, enter alternate corporate	name adopted for the purpose of transacting	ng business in Florida)	
NEW Y	10RK	3. 27 - 175 75 (FEI number, if ap	45	
4 <i>I</i>	28 10	5(Date of duration, if other		
(Date of in	corporation)	(Date of duration, if other)	than perpetual)	
6				
	(Date first transacted busi (SFF SECTIONS 607 1501 &	iness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liabili	ity)	
	11			
_ 10	171 (01111)	• •	•	4 D-4011 61 3214F
7. <u>/8</u>	671 COLLINS	AVENUE APT 1204	•	11 BEACH , FL 33160
7. <u>/8</u>	671 COLLINS (Princip	• •	•	11 BEACH ,FL 33160
7. <u>/8</u>	(Princip	AVENUE APT 1204 pal office street address)	Nerth MIAM	
7	(Princip	AVENUE APT 1204	Nerth MIAM	
	(Princip	AVENUE APT 1204 pal office street address) mailing address, if different)	Nerth MIAM	
8. Name and street add	(Princip (Current dress of Florida registered agent)	AVENUE APT 1204  pal office street address)  mailing address, if different)  : (P.O. Box NOT acceptable)	Nerth MIAM	
8. Name and street add	(Princip (Current	AVENUE APT 1204  pal office street address)  mailing address, if different)  : (P.O. Box NOT acceptable)	Nerth MIAM	
8. Name and street add Name:	(Princip (Current dress of Florida registered agent)	AVENUE APT 1204 pal office street address) mailing address, if different)  : (P.O. Box NOT acceptable)	Nerth MIAM	
8. Name and <u>street add</u> Name:	(Princip (Current dress of Florida registered agent: RONEN SEGEV (67) COLLINS AVE.	AVENUE APT 1204 pal office street address) mailing address, if different)  : (P.O. Box NOT acceptable)	Nerth MIAM	

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.



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

A. DIRECTORS				
□Chairman	Name: RUNEN SEGEV	□Chairman	Name	
□Vice Chairman	Address: 1867/ COLLINS AVE.	□Vice Chairman	Address:	
□Director	APT 1204	□Director		
₹President	NORTH MIAMI BEACH, FL33160	□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary		□Treasurer
Other		□Other		□Other
□Chairman	Name:	□Chairman	Name;	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐Secretary		□Treasurer ~;
□Other	Other	□Other		□Treasurer
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address	24.
Director		□Director	<del></del>	
□President		□President		
□Vice President		□Vice President		<del> </del>
□Sceretary	□Treasurer	☐Secretary		∃Treasurer
□Other	Other	□Other		□Other
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Fiorida Department Signature of Director of	nt of State Annual Re	d for reporting perport form.	urposes only, Non-indexed
The officer or direct	Signature of Director of Signature of Director of Control of Signature of Director of Signature of Sig	r 11 above) affirms th	at the facts states ites a third degree	I herein are true and that he or e felony as provided for in

13. A NONEN SEGEV
(Typed or printed name and capacity of person signing application)

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of FERMATA MUSIC, INC. was filed on 01/26/2010, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



\*\*\*

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 20th day of October two thousand and twenty.

Braden C Hydra

Brendan C Hughes
Executive Deputy Secretary of State