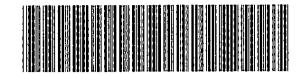
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FILED 2021 JAN -7 PM 3: 45 SECRETARY OF STATE



# COVER LETTER

	stration Section ion of Corporations			
SURJECT	MMA Global Group, Inc.			
SOBJECT.	Name	of corporation -	must include suffix	
Dear Sir or M	ladam:			
"Certificate o	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to t	of Good Standi	ing" and check are submitt	
Please return	all correspondence concerni	ing this matter to	o the following:	202
Robert J. Cald	well, General Counsel			· · · · · · · · · · · · · · · · · · ·
		Name of Po	erson	27
MMA Global	Group, Inc.			S. T
		Firm/Comp	any	
50 NW 14th S	treet			3: 4 5 TA: FFA:
		Address	s	m of
Miami, Florida	a 33136			
		City/State and	l Zip code	
rcaldwell@mn	naglobalgroup.com			
	E-mail address	s: (to be used for	r future annual report notif	ication)
For further in	formation concerning this m	natter, please cal	H:	
Robert J. Cald	well	786 at (	774-4238	
Nam	e of Person	Area Code	Daytime Telephone	e Number
Regis Divis The C 2415	EET/COURIER ADDRES stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on orations
	check for the following amoreck payable to: FLORIDA Diing Fee	EPARTMENT C g Fee & □ :		\$87.50 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.

١.	MMA Global Group, Inc.						
		orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp,")	ED,	" "COMPANY," "CORPORATION."			
	N/A						
	(If name unavaila	able in Florida, enter alternate corporate nar	me	adopted for the purpose of transacting b	usiness ir	ı Florid	a)
2.	Delaware		3.	None			
	(State or countr	y under the law of which it is incorporated)		(FEI number, if applic	able)		
4.	June 8, 2020		5.	Perpetual			
	(Date of incorporation)		(Date of duration, if other than perpetual)				
6.	Date of Registra	ition			ζņ	20,	
				n Florida, if prior to registration) 502, F.S., to determine penalty liability)	147 - 1761 141 - 380	2021 JAN -	
<i>/</i> .	Same as above		offi	ce <u>street</u> address)	S SEE	PH (	
		(Current ma	ilir	eg address, if different)	FL	_မှ_ 5	_
8.	Name and stree	et address of Florida registered agent: (l	P.C	). Box NOT acceptable)			
	Name:	Robert J. Caldwell					
О	ffice Address:	50 NW 14th Street					
		Miami		. Florida			
		(City)		(Zip code)			

#### 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the plac designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity further agree to comply with the provisions of all statutes relative to the proper and complete performance of my d and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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

A. DIRECTORS					
□Chairman	Name: Alan McGlade	□Chairman	Name:		
□Vice Chairman	Address: 50 NW 14th Street	□Vice Chairman	Address:		
Director	Miami, Florida 33136	□Director			
□President		□President			
□Vice President		□Vice President			
Secretary	□Treasurer	□Secretary	□Treasurer		
□Other	Other	□Other	□Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director	2021 SEC		
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	☐ Secretary	Office Service of the		
□Other	□ Other	□Other	<b>باز</b> الت		
□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	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-inc individuals may be added to the index when filing your Florida-Department of State Annual Report form.  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 she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provide s.817.155, F.S.  Alan McGlade, Director					

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### Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MMA GLOBAL GROUP 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 JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MMA GLOBAL GROUP STORM INC." WAS INCORPORATED ON THE EIGHTH DAY OF JUNE, A.D. 2020

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

3022906 8300

Authentication: 202223388

Date: 01-06-21