(F	Requestor's Name)	
(<i>F</i>	Address)	
	Address)	
	City/State/Zip/Phone #)	
☐ PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
([Document Number)	
Certified Copies	Certificates of	Status
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K Brumbins

GODDODAETON GERNTON COMPANY

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 612733 4983A

AUTHORIZATION : Cypull Elec

COST LIMIT : \$^{'/}78.75

ORDER DATE: January 12, 2021

ORDER TIME : 2:31 PM

ORDER NO. : 612733-005

CUSTOMER NO: 4983A

FOREIGN FILINGS

NAME: IDORU, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corpor				
SUBJ	JECT: Idoru, Inc.				
		Name of corporat	ion - mu	st include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence,"	by Foreign Corporation is or "Certificate of Good S orporation to transact bus	tanding'	and check are sub	
Please	return all correspond	lence concerning this ma	tter to th	e following:	
Kevin	McNab				
		Name	of Perso	n	
Cozen	O'Connor				
•		Firm/C	ompany		
1650 N	farket Street. Suite 280	0			
		Ac	ldress		
Philade	elphia, PA 19103				
		City/Stat	e and Zi	p code	
KMcN	ab@cozen.com				
		E-mail address: (to be use	ed for fu	ture annual report r	notification)
For fu	rther information cor	cerning this matter, pleas	se call:		
Kevin	L. McNab	at (66	55-2117	
	Name of Person	Area C	ode	Daytime Telepl	hone Number
	STREET/COURI Registration Section Division of Corpor The Centre of Talka 2415 N. Monroe St Tallahassee, FL 32	n ations ihassee reet, Suite 810		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Please		following amount: FLORIDA DEPARTME S78.75 Filing Fee & Certificate of Status	□ \$78	STATE .75 Filing Fee & rtified 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.

	ilable in Florida, enter alternate corporate name a	-	-
2. Delaware	$\frac{3.8}{\text{atry under the law of which it is incorporated}}$	(FEI number, if app	
	arry under the law of which it is incorporated)	(FEI number, if app	olicable)
4. <u>7/24/20</u>	5	(Date of duration, if other th	
	•	(Date of duration, if other th	han perpetual)
6	Upon filing		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		y)
7 10012 NW 7th	St #214. Miami, FL 33172		
· ·	(Principal office	e <u>street</u> address)	
	(Current mailing	address, if different)	2021
	(Current mailing	address, if different)	2 021 JA
8. Name and <u>str</u>	(Current mailing eet address of Florida registered agent: (P.O.		2021 JAN 1
	·		2021 JAN 14
Name:	eet address of Florida registered agent: (P.O. Corporate Service Company		3 3
	eet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street	Box <u>NOT</u> acceptable)	3 3
Name:	eet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street	Box <u>NOT</u> acceptable)	in:
Name:	eet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street		3 3
Name: Office Address:	cet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street Tallahassee (City)	Box <u>NOT</u> acceptable)	3 3
Name: Office Address: 9. Registered a	cet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street Tallahassee (City) gent's acceptance:	Box NOT acceptable) Florida 32301(Zip code)	AM 9: 03
Name: Office Address: 9. Registered a Having been na designated in th	cet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street Tallahassee (City) gent's acceptance: med as registered agent and to accept service is application, I hereby accept the appointmet	Box NOT acceptable) , Florida 32301 (Zip code) e of process for the above stated ent as registered agent and agree	corporation at the place to act in this capacity.
Name: Office Address: 9. Registered a Having been na designated in th further agree to	cet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street Tallahassee (City) gent's acceptance: med as registered agent and to accept service is application, I hereby accept the appointme comply with the provisions of all statutes rei	Box NOT acceptable) , Florida 32301, Code) e of process for the above stated ent as registered agent and agree lative to the proper and complete	corporation at the place to act in this capacity.
Name: Office Address: 9. Registered a Having been na designated in th further agree to	cet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street Tallahassee (City) gent's acceptance: med as registered agent and to accept service is application, I hereby accept the appointme comply with the provisions of all statutes rel ar with and accept the obligations of my posi	Box NOT acceptable) , Florida 32301, (Zip code) e of process for the above stated ent as registered agent and agree lative to the proper and complete ition as registered agent.	corporation at the place to act in this capacity.
Name: Office Address: 9. Registered a Having been na designated in th further agree to	cet address of Florida registered agent: (P.O. Corporate Service Company 1201 Hays Street Tallahassee (City) gent's acceptance: med as registered agent and to accept service is application, I hereby accept the appointme comply with the provisions of all statutes rei	Box NOT acceptable) , Florida 32301, (Zip code) e of process for the above stated ent as registered agent and agree lative to the proper and complete ition as registered agent.	corporation at the place to act in this capacity.

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.

A. DIRECTORS Mica Le John Michael Taylor Name: □ Chairman Name: □ Chairman 10012 NW 7th St #214 10012 NW 7th St #214 Address: □Vice Chairman Address: __ □ Vice Chairman Miami, Fl. 33172 Miami, FL 33172 □ Director □ Director □ President President □Vice President __ ☐ Vice President ■ Secretary ■ Treasurer □ Secretary □Treasurer □Other _____ □Other _____ □Other _____ □Other _____ □ Chairman Name: ______ Name: □Chairman □Vice Chairman Address: _____ □ Vice Chairman Address: _____ __ __ ___ ___ Director □ Director □President President □Vice President ☐ Vice President □ Secretary □Treasurer □ Secretary □Treasurer □Other __ __ __ __ □Other □Other _____ ☐Other _____ ☐ Chairman Name: ______ □ Chairman Name: □Vice Chairman Address: □Vice Chaiπnan Address: □ Director □ Director □ President □ President □Vice President □ Vice President ☐ Secretary ☐ Secretary ☐ Treasurer □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. mica lejohn. 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.

Mica Le John, Secretary & Treasurer



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

DELAWARE, DO HEREBY CERTIFY "IDORU, 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 TWELFTH DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IDORU, INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JULY, A.D. 2020.

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



Authentication: 202272187

Date: 01-12-21