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	Division of Cor	rporations		
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From:				
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	Account Number	: 120000000195		
	Phone	: (850)521-0821		
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FOREIGN PROFIT/NONPROFIT CORPORATION SCALIAN CORPORATION

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COVER LETTER

TO:		tration Section ion of Corporations					
SUBJ!	r/T.	Sealian Corporation					
a C pa	ECI.	Name of corporation - must include suffix					
Dear S	ir or M	adam:					
"Certit	icate o	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	f G	ood Standir	thorization to Transact Business in Florida," ng" and check are submitted to register the in Florida.		
Please	return	all correspondence concerning	ţ th	is matter to	the following:		
Nicola	s Ferry						
	•		ı	Name of Pe	rson		
Scaliar	т Согроз	ration					
		,	ŀ	irm/Compa	ny		
c/o Pra	imex, l	251 Avenue of the Americas, FL3	3				
				Address			
New Y	ork, N	r 10020					
			Cit	y/State and	Zip code		
emile.	ruas@pi	ramex.com					
		E-mail address:	(to	be used for	future annual report notification)		
For fu	rther in	formation concerning this mat	tter	, please cal	l:		
Nicola	ь Гату	а	: 	212	583-4920		
	Nam	ie of Person	/	Area Code	Daytime Telephone Number		
	Regis Divis The C 2415	EET/COURIER ADDRESS: stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 thassee, FL 32303	:		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Please	make c	check for the following amounted heek payable to: FLORIDA DEL ling Fee	PAI Fe	RTMENT C e & 🖂	OF STATE \$78.75 Filing Fee & Certificate of Status & Certified Copy		

CSC TRANSO1

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.

(If name unavails	ble in Florida, enter alternate corporate o	ame adopted for the purpose of transacting bus	siness in Florida)
(State or country	y under the law of which it is incorporate	3. 46-4674716 (FEI number, if applica	ble)
(Date	of incorporation)	5. (Date of duration, if other thun p	perpetual)
	(Date first transacted busin) (SEE SECTIONS 607.1501 & 6	ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	
888 Prospect Stre	et, Suite 200, La Jolla, CA 92037		
	ers !		
	(Principa	al office <u>street</u> address)	
	Avenue of the Americas, FL3, New Yor (Current r	nailing address, if different)	
Name and stree	Avenue of the Americas, FL3, New Yor (Current rest address of Florida registered agent: Corporation Service Company	nailing address, if different)	
Name and stree	Avenue of the Americas, FL3, New Yor [Current rest address of Florida registered agent: Corporation Service Company 1201 Hays Street	rk, NY 10020 nailing address, if different) (P.O. Box NOT acceptable)	
Name and stree	Avenue of the Americas, FL3, New Yor [Current rest address of Florida registered agent: Corporation Service Company 1201 Hays Street	rk, NY 10020 nailing address, if different) (P.O. Box NOT acceptable)	
Name and street Name: office Address:	(Current rest address of Florida registered agent: Corporation Service Company 1201 Hays Street Tallahassee (City)	(P.O. Box NOT acceptable) Florida 32301 (Zip code)	
Name and street Name: Name: flice Address: Registered age aving been numesignated in this arther agree to c	(Current rest address of Florida registered agent: Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: and as registered agent and to accept application, I hereby accept the app	(P.O. Box NOT acceptable) (P.O. Box NOT acceptable) Florida 32301 (Zip code) service of process for the above stated corointment as registered agent and agree to the relative to the proper and complete pe	act in this capacity
Name and street Name: Name: flice Address: Registered age aving been namesignated in this arther agree to cond I am familian	Avenue of the Americas, Fl.3, New Yor (Current rest address of Florida registered agent: Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to accept application, I hereby accept the appomply with the provisions of all state	(P.O. Box NOT acceptable) (P.O. Box NOT acceptable) Florida 32301 (Zip code) service of process for the above stated corointment as registered agent and agree to the relative to the proper and complete pe	act in this capacity.
Name and street Name: Iffice Address: Registered age laving been name esignated in this arther agree to c and I am familiar	(City) Ent's acceptance: acceptance: acceptance: acceptance: application, I hereby accept the appoint with and accept the obligations of new the control of the contro	(P.O. Box NOT acceptable) (P.O. Box NOT acceptable) Florida 32301 (Zip code) service of process for the above stated corointment as registered agent and agree to the relative to the proper and complete pe	act in this capacity

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

A. DIRECTORS			
(ii) Chairman	Name: Vvan Chilistine	DCIndrana .	Jenn-Manuel Silva Naore:
ElVice Chairman	Address: 1351 Avenue of the Americas	□Vice Charman	Address: 1251 Avenue of the Americas
W Director	FLN	#Bresder	FL3
₩ Pre-ident	New York, NY 10020	WPresident	New Yark, NY 10070
ENVEY President	***************************************	DYna President	
OScowary	₩3 Nasanvt	** Secretary	Themare)
₩Other	DOMA	DONE	Done
S Chrimes	Nicoles Ferry Name:	DOMinum	Name:
	Address: 1251 Avenue of the Americas	GVice Chairman	Address:
Dienctor	FL3	CDirector	
Dimilen	New York, NY 10020	OPecadon	
□Vice President		EPVice Persident	
# Secretary	The constitution of the co	ElSexivtory	Diversure
Citation		Elogics	MATHER
III Chairean	Name.	(Haliman	Ngmç"
Civice Chainson	Address*	ElVior Chairman	Nifest
Director		Otherm	
(President		[[President	
ElVice President		UVice President	
@Sacratary	Measurer	EliSerrary	Efficasurer
Contact	DOING	Gilther	. Wilder
importum Notice; individuals may b	Use an attachment to report on se than six its. Bit so added to the index when Clinp your floride Departs	mone of State Annual R	upon form
13.	Comments of the Comments of th	e en l'Elean	
	Signatum of Directo		by the theory Swood besein me frue said that on

The officer in director signing this descoment (and soboly listed in number 11 above) at firms that the facts shauld be rein are true and that no or size is aware that false inflormation submitted in a document to the Department of State constitutes a third degree felong as post-field for in x \$17.155. U.S.

13. Nicolas Farry, Corporate Secretary



Page 1

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

DELAWARE, DO HEREBY CERTIFY "SCALIAN CORPORATION" 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 SEVENTEENTH DAY OF FEBRUARY, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SCALIAN CORPORATION" WAS INCORPORATED ON THE FOURTH DAY OF DECEMBER, A.D. 2013.

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



Authentication: 202535117

Date: 02-17-21