## F21000001832

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	· #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



400359786554

02/12/21--01028--015 \*\*236,25

2/2/by

## **COVER LETTER**

	ration Section on of Corporations			
SUBJECT:	ClicHoldings Corp.			
oobsect.	Name o	of corporation - mi	ast include suffix	······································
Dear Sir or Ma	dam:			
"Certificate of	Application by Foreign Co Existence," or "Certificate ed foreign corporation to tr	of Good Standing	" and check are sub	
Please return a	Il correspondence concerni	ng this matter to th	ne following:	
	Amanda Blaufus			
		Name of Perso	on	
	White Summers Caffee & Ja	mes, LLP		Just
		Firm/Company	,	
	805 SW Broadway, Suite 24	40		
	<del></del>	Address		
	Portland, OR 97205			
		City/State and Z	ip code	3
	jshephard@clictell.com			
	E-mail address:	(to be used for fu	ture annual report r	notification)
For further info	ormation concerning this ma	atter, please call:		
Amand	a Blaufus	at ()	688-4393	
Name	of Person	Area Code	Daytime Telep	hone Number
Registr Divisio The Ce 2415 N Tallaha	ET/COURIER ADDRESS ration Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assec, FL 32303		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
	heck for the following amounts payable to: FLORIDA DE g Fee S78.75 Filing Certificate of	PARTMENT OF S Fee & S78	STATE 3.75 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.

f name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting bi	ısiness in Florida)
Oblaware 3. (State or country under the law of which it is incorporated)		85-3434497	
State or countr	y under the law of which it is incorporated)	(FEI number, if applic	able)
October 7, 202	55.		
(Date	of incorporation)	(Date of duration, if other than	perpetual)
<del></del>			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502)		
20423 State Ro	ad 7, Ste F6-471, Boca Raton, FL 33498		
<del></del> -	(Principal office	street address)	:
	(Current mailing	address, if different)	
	_		
Name and street	et address of Florida registered agent: (P.O.		- ·
Name and <u>stree</u> Name:	_		- · · · · · · · · · · · · · · · · · · ·
	et address of Florida registered agent: (P.O.		
Name:	et address of Florida registered agent: (P.O. Mahendra (Mike) Doobay	Box <u>NOT</u> acceptable)	
Name:	Mahendra (Mike) Doobay  20423 State Road 7, Ste F6-471		- · · · · · · · · · · · · · · · · · · ·

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			B : 1 0W			
Chairman	Name: Mahendra (Mike) Doobay	□Chairman	Name: Benjamin Gill			
□Vice Chairman	Address: 20423 State Road 7, Ste F6-471	□Vice Chairman	Address: 20423 State Road 7, Ste F6-471			
Director	Boca Raton, FL 33498	Director	Boca Raton, FL 33498			
President		□President	<del> </del>			
□Vice President		□Vice President				
Secretary	Treasurer	Secretary	☐Treasurer			
□Other	□Other	□Other	□Other			
□Chairman □Vice Chairman	Name: James Shephard  20423 State Road 7  Address:	□Chairman □Vice Chairman	Name:			
Director	Ste F6-471	□Director				
□President	Boca Raton, FL 33498	□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				
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	Other	□Other	Other			
individuals may be	Ise an attachment to report more than six (6). The added to the index when filing your Florida Depar	attachment will be imaged truent of State Annual Rep	I for reporting purposes only. Non-indexed port form.			
	Signature of Directe	or o Officer				
The officer or direct she is aware that fall s.817.155, F.S.	tor signing this document (and who is listed in nunse information submitted in a document to the Dep	nber 11 above) affirms that partment of State constitut	at the facts stated herein are true and that he or es a third degree felony as provided for in			
13.	Mahendra (Mike) Doobay, CEO & F					
(Typed or printed name and capacity of person signing application)						



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

DELAWARE, DO HEREBY CERTIFY "CLICHOLDINGS CORP." 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 NINTH DAY OF FEBRUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLICHOLDINGS

CORP." WAS INCORPORATED ON THE SIXTEENTH DAY OF OCTOBER, A.D. 2019.

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

Authentication: 202468938

Date: 02-09-21

7657155 8300 SR# 20210380132