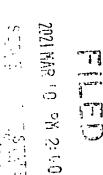
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

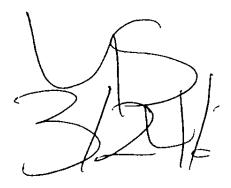




900359848239

93/10/21--01010--012 \*\*70.00





## COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: BaronHR East, Inc.				
7	lame of corporati	on - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Forei "Certificate of Existence," or "Certiabove referenced foreign corporation	ficate of Good St	anding" and check are subn		
Please return all correspondence cor	ncerning this mat	ter to the following:		
Dottie Randazzo			207	
	Name o	of Person	<u> </u>	
Professional Legal Assistors, Inc.				
	Firm/Co	ompany	-o 4	
P.O. Box 3258			31.5 N	
	Ade	dress	PE 2 E0	
Wilmington, DE 19804			د. ۴.	
· · · · · · · · · · · · · · · · · · ·	City/State	and Zip code		
dottie@biz-usa.com				
E-mail a	ddress: (to be use	for future annual report no	otification)	
For further information concerning	this matter, please	e call:		
Dottie Randazzo	at ( 302	999-9960 ode Daytime Telepho		
Name of Person	Area Co	ode Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	~	NT OF STATE  ☐ \$78.75 Filing Fee &  Certified Copy	☐ \$87.50 Filing Fee, Certificate of Stati Certified Copy	

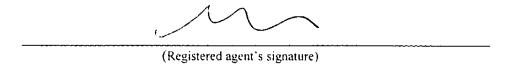
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TEAL.

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.

1.	BaronHR East,	mc.							
••	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc.," "Co.," "Corp,")								
	(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transac	cting busine	ss in F	orida)			
2.	Delaware	3							
	(State or countr	y under the law of which it is incorporated) 3.	(FEI number, it	[applicable]	)				
4	12/18/2017	of incorporation) 5.							
•••	(Date	(Date of duration, if oth	er than perp	oetual)					
6.									
٧.		(Date first transacted business in F	lorida, if prior to registration)						
		(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 lvd., Suite 130, Anaheim, CA 92808 (Principal office	2. F.S., to determine penalty lia street address)	bility) (^	2021 KLP 10				
7.	8101 E. Kaiser Bl	(SEE SECTIONS 607.1501 & 607.1502 lvd., Suite 130, Anaheim. CA 92808 (Principal office (Current mailing)	2. F.S., to determine penalty lia  street address)  address. if different)	bility)	<u>.                                    </u>				
7.	8101 E. Kaiser Bl	(SEE SECTIONS 607.1501 & 607.1502  lvd., Suite 130, Anaheim. CA 92808  (Principal office  (Current mailing of a second se	2. F.S., to determine penalty lia  street address)  address. if different)						
7.	8101 E. Kaiser Bl	(SEE SECTIONS 607.1501 & 607.1502 lvd., Suite 130, Anaheim. CA 92808 (Principal office (Current mailing)	2. F.S., to determine penalty lia  street address)  address. if different)		<u>.                                    </u>	T			
7. <sub>.</sub>	8101 E. Kaiser Bi	(SEE SECTIONS 607.1501 & 607.1502  lvd., Suite 130, Anaheim. CA 92808  (Principal office  (Current mailing of a second se	2. F.S., to determine penalty lia  street address)  address. if different)		<u>.                                    </u>				
7. <sub>.</sub>	Name and street	(SEE SECTIONS 607.1501 & 607.1502  lvd., Suite 130, Anaheim. CA 92808  (Principal office  (Current mailing and address of Florida registered agent: (P.O. Pacific Registered Agents, Inc.  5647 110 Avenue North	2. F.S., to determine penalty lia  street address)  address. if different)		<u>.                                    </u>				

## 9. Registered agent's acceptance:

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, further agree to comply with the provisions of all statutes relative to the proper and complete performance of my deand 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 applic the Department of State, by the Secretary of State or other official having custody of corporate records in the jurinder the law of which it is incorporated.

A. DIRECTORS	•								
□ Chairman	Name:	□Chairman	Name:						
□Vice Chairman	Address: 8101 E. Kaiser Blvd.	□Vice Chairman	Address:						
Director	Suite 130	□Director							
President	Anaheim, CA 92808	□President							
□Vice President		□Vice President	<del></del>						
<b>■</b> Secretary	<b>■</b> Treasurer	□Secretary	□Treasurer						
Other	Other	Other	Other						
□Chairman	Name:	□Chairman	Name:						
□Vice Chairman	Address:	□Vice Chairman	Address:						
□Director		□Director							
□President	<u> </u>	□President	<del></del>						
□Vice President		□Vice President	202						
□Secretary	□Treasurer	□Secretary	□Trejsurer □						
□Other	□Other	□Other							
□Chairman	Name:	□Chairman	Name:						
□Vice Chairman	Address:	□Vice Chairman	Address:						
□Director		□Director	<del></del>						
□President		□President	<del></del>						
□Vice President		□Vice President	<del></del>						
☐ 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-ir individuals may be added to the index when filing your Florida Department of State Annual Report form.									
12. <u>Ulises Saureaux DE</u>									
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 she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provis.817.155, F.S.									

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

DELAWARE, DO HEREBY CERTIFY "BARONHR EAST, 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 EIGHTEENTH DAY OF FEBRUARY, A.D.

2021.

6667966 8300 SR# 20210517676

Date: 02-18-21

Authentication: 202546316

You may verify this certificate online at corp.delaware.gov/authver.shtml