Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053

Phone : (561)694-8107 Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address plant.

Email	Address:				
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FOREIGN PROFIT/NONPROFIT CORPORATION

QuickFrame Inc.

Certificate of Status	0
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Page Count	05
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COVER LETTER

TO: Registration Secti Division of Corpo			
SUBJECT: QuickFrame	Inc.		
30b3EC1	Name of corporation	n - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence,"		Authorization to Transact Business in Florida," nding" and check are submitted to register the ess in Florida.	
Please return all correspor	ndence concerning this matte	rt to the following:	
Deborah E. Kalstek, Paraleg	al		
	Name of	Person	_
Hodgson Russ LLP			
	Firm/Con	mpany	_
140 Pearl St., Stc. 100			
***************************************	Addr	ress	
Buffalo, NY 14202			
	City/State a	and Zip code	
lucas@quickframe.com			
	E-mail address: (to be used	for future annual report notification)	
For further information ec	ncerning this matter, please	call:	
Deborah E. Kalstek, Paraleg	at (848-1371	
Name of Person	Area Coo	de Daytime Telephone Number	
STREET/COUR Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	on orations lahassee Street, Suite 810	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	o: FLORIDA DEPARTMENT	T OF STATE ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee Certified Copy Certificate of State 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.

(If name unava	ilable in Florida, enter alternate corporate		ing business in Florida)	-
2. Delaware		3. <u>47-1134020</u>		-
(State or coun	try under the law of which it is incorporate	ed) (FEI number, if a	pplicable)	
06/11/14 4.		5		_
(Da	te of incorporation)	(Date of duration, if other	r than perpetual)	
6.				
		ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liabi	lity)	
7 4131 Laguna St	L, #615, Coral Gables, FL 33114		· c 21	
/·	(Princip	al office street address)	21 APR	n
	(Current	mailing address, if different)	-6	
8. Name and <u>str</u>	<u>cet address</u> of Florida registered agent:	(P.O. Box NOT acceptable)	AH 9	
Name:	Lucas Loeffler		9: 01 STAT E. FL	
Office Address:	4131 Laguna St., #615		m —	
	Coral Gables	, Florida		
	(City)	(Zip code)		
Having been na designated in th further agree to	gent's acceptance: med as registered agent and to accept is application, I hereby accept the app comply with the provisions of all stati ar with and accept the obligations of n	pointment as registered agent and aguites relative to the proper and compl my position as registered agent.	ree to act in this capa	icity. I
	ايم ا	Z		
•	(Registered age	nt's signature)	_	

^{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.

2021 1:51 PM -	15012148442	→ 100001/0000			pg 4 Oi
A. DIRECTORS					
□Chairman	Name: Lucas Loeffler	□ Chairman	Name:		
□Vice Chairman	Address: 4131 Laguna St., #615	□Vice Chairman	Address:		
Director	Coral Gables, FL 33114	Director			
□President		□President			
□Vice President		□Vice President		· · · · · · · · · · · · · · · · · · ·	
Secretary	Treasurer	☐ Secretary		☐Treasurer	
CEO CEO	Other	□Other	<u></u>	Other	
□Chairman	Joe Reid Name:	Chairman	Name:		
□Vice Chairman	4233 24th St. Address:	□Vice Chairman	Address:	·····	
Director	San Francisco, CA 94114	Director			····
□President		□President		· · · · · · · · · · · · · · · · · · ·	
□Vice President		□Vice President			····
Secretary	□Treasurer	□ Secretary		☐Treasurer	
COO □Other □		□Other		Other	
□Chairman	Name: Spencer Weinman	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director	Tarrytown, NY 10591	Director			
□President		President			
□Vice President		□Vice President		<u>-</u>	
Secretary	☐Treasurer	☐ Secretary		☐Treasurer	
CRO	□Other	□Other		Other	
individuals may be	Use an attachment to report more than six (6). To added to the index when filing your Florida De Signature of Dir	partizioni of State Annual Re	d for reporting	purposes only. Non-i	indexed

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.

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "QUICKFRAME 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 APRIL, 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 "QUICKFRAME INC."

WAS INCORPORATED ON THE ELEVENTH DAY OF JUNE, A.D. 2014.

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

Authentication: 202905796

Date: 04-06-21