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(Requestor's Name)				
(Address)				
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	of Status		
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COVER LETTER

	tion Section of Corporations			
SHOULECT: C	Continental Readers Group	, Inc.		
SUBJECT: _	Name	of corporation -	nust include suffix	
Dear Sir or Mad	am:			
"Certificate of E	pplication by Foreign C xistence," or "Certificat I foreign corporation to	e of Good Standii	ng" and check are subm	Business in Florida," itted to register the
Please return all	correspondence concert	ning this matter to	the following:	
Kjerstine Hansen				
		Name of Pe	rson	
Continental Read	lers Group, Inc.			
		Firm/Compa	ny	
350 E St.				
		Address	***************************************	
Santa Rosa, CA 9	5404			
,		City/State and	Zip code	
Kjerstine.Hansen	@rac.bz			
	E-mail addres	ss: (to be used for	future annual report no	tification)
For further infor	mation concerning this	matter, please cal	:	
Kjerstine Hansen		at (707	571-7610 x 103 Daytime Telepho	
Name o	f Person	Area Code	Daytime Telepho	one Number
Registra Division The Cen 2415 N.	T/COURIER ADDRE tion Section of Corporations tre of Tallahassee Monroe Street, Suite 81 isee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
	eck for the following and payable to: FLORIDA I Fee \$78.75 Fili Certificate	DEPARTMENT Ong Fee & 12 5	F STATE 378.75 Filing Fee & Certified Copy	\$87.50 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.

(If name unavails	ble in Florida, enter alternate corporate name ac		g business in Florida)
State of California 3		45-3248836	
(State or country	under the law of which it is incorporated)	(FEI number, if ap	plicable)
9/21/2018	5	(Date of duration, if other t	
(Date	of incorporation) 5	(Date of duration, if other t	han perpetual)
·	(Date first transacted business in		
	(Date first transacted business in (SEE SECTIONS 607,1501 & 607,150	Florida, if prior to registration) 12, F.S., to determine penalty liabili	ty)
2493 Andros Lan	e, Fort Lauderdale, FL 33312		
•	(Principal office	e <u>street</u> address)	
350 E St. Santa R	losa, CA 95403		
	(Current mailing	address, if different)	
	s without of Playida vanistavad spants /P.O.	Pay NOT againstable)	s 2
, Name and stree	et address of Florida registered agent: (P.O. Ronald Allen	nox inot acceptable)	
Name:	Konaid Aften		
ranne.	2493 Andros Lane		
		33312	्रिक् स्टूब्स स्टूब्स
	Fort Lauderdale	, Florida	1
Office Address:	Fort Lauderdale (City)	, Florida (Zip code)	္ကိုင္က
Office Address:		, Florida	1 3: 22 STATE

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			
□Chairman	Name: Ronald Aflen II	□Chairman	Name: Anastacia Bransfield
□Vice Chairman	Address: 2493 Andros Lane	□Vice Chairman	Address: Continental Readers Group
□Director	Fort Lauderdale, FL 33316	Director	350 E St.
President		ElPresident	Santa Rosa, CA 95404
∐Vice President		□Vice President	
Disecretary	□Treasurer	□Secretary	⊞Treasurer
[]Other	□ Other	■Other MANAG	ER Other
□Chairman	Name:	□Chairman	Name:
CIVice Chairman	Address:	ElVice Chairman	Address;
□Director		□ Director	
□President	/	[]President	*
□Vice President		∐Vice President	
ElSecretary	☐ Treasurer	□ Secretary	□Treasurer
□Other	Other	□Other	[]Other
□Chairman	Name:	∐Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
ElDirector		Director	
□President		□President	***
□Vice President		□Vice President	
☐Secretary	ClTreasurer	□Secretary	□Treasurer
□Other		□Other	Other
Important Notice: Uindividuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department	hment will be imaged it of State Annual Re	I for reporting purposes only. Non-indexed port form.
12			
	Signature of Director or		
she is aware that falls.817.155, F.S.	tor signing this document (and who is listed in number lse information submitted in a document to the Departn	11 above) affirms the tent of State constitut	nt the facts stated herein are true and that he or es a third degree felony as provided for in
13. Ronald Allen	i, II President		

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

CONTINENTAL READERS GROUP, INC.

FILE NUMBER: FORMATION DATE:

C3412129 09/14/2011

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, SHIRLEY N. WEBER, PH.D. Secretary of State of the State of California hereby certify:

The entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 05, 2021.

Shirley N. Weber, Ph.D. Secretary of State