## Fa100003307

(Requestor's Name)					
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(City/	State/Zip/Phon	e #)			
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r C	OVER LE	TTER 4		·	· Š			٠ <del></del>
TO: Registration Section Division of Corporations					•			
SUBJECT: Confirm4Me, Inc.								
	f corporation -	must includ	le suffix				<del></del>	
Dear Sir or Madam:								
The enclosed "Application by Foreign Cor "Certificate of Existence," or "Certificate of above referenced foreign corporation to tra	of Good Stand	ing" and che						
Please return all correspondence concernin	g this matter t	o the follow	ing:		,	2021		
Michael B. Bittner, Esq.					- ;		- 77	
	Name of Po	erson				2		
Law Office of Michael B. Bittner					-	77		
9838 Old Baymcadows Road #315	Firm/Comp	any				ի կ։ 25		
	Addres	S						
Jacksonville, FL 32256								
mike@bittnerlegalgroup.com	City/State and	l Zip code						
E-mail address:	(to be used for	r future anni	ual report	notific	ation)			
For further information concerning this ma-	tter, please cal	1:						
Michael B. Bittner	904 .t (	608-1289						
Name of Person	Area Code	Dayı	ime Tele	phone 1	Number	<del></del>		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	:	Reg Div P.O	ALING distration dision of 0 dispersion Box 63 dahassee,	Section Corpora 27	n itions			
Enclosed is a check for the following amou Please make check payable to: FLORIDA DEF  \$70.00 Filing Fee	PARTMENT C Fee & 🔲 S	OF STATE \$78.75 Filin Certified Co	_		\$87.50 Fili Certificate Certified C	of Stat		

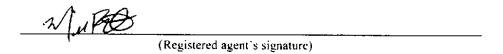
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

Confirm4Me, Ir	nc.					
		." "CO	MPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate name	adopte	d for the purpose of transacting busi	ness in F	Torida)	
Delaware	3	85100	01538			
(State or countr	ry under the law of which it is incorporated)		(FEI number, if applicab	e)	-	
4/1/2020	5.	Perpe	tual			
(Date of incorporation) 5.		(Date of duration, if other than perpetual)				
				2021		
215 Southpoint	Boulevard, Ste. 260				٠.	
	(Principal off	ice <u>stre</u>	et address)	1/2	• • •	
lacksonville, FL	32216					
	(Current mailir	ng addr	ess, if different)	PH #		
Name and stree		D. Box	NOT acceptable)	5.		
Name:	Law Office of Michael B. Bittner					
ice Address:	4238 Salisbury Road North, Stc. 202					
	Jacksonville		Florida 32216			
	(City)		(Zip code)			
	(Enter name of c "Inc" "Co" "C  (If name unavail Delaware  (State or count) 4/1/2020  (Date)  215 Southpoint  acksonville, FL  Name and street	"Inc.," "Co.," "Corp.," "Inc.," "Co,," or "Corp.")  (If name unavailable in Florida, enter alternate corporate name Delaware  (State or country under the law of which it is incorporated)  4/1/2020  (Date of incorporation)  (Date first transacted business i (SEE SECTIONS 607.1501 & 607.1  215 Southpoint Boulevard, Ste. 260  (Principal off acksonville, FL 32216  (Current mailing Name and street address of Florida registered agent: (P.C.)  Name:  Law Office of Michael B. Bittner  4238 Salisbury Road North, Ste. 202  Jacksonville	(Enter name of corporation; must include "INCORPORATED." "CO" "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.")  (If name unavailable in Florida, enter alternate corporate name adopte Delaware  (State or country under the law of which it is incorporated)  4/1/2020  (Date first transacted business in Floric (SEE SECTIONS 607.1501 & 607.1502, F. 215 Southpoint Boulevard, Stc. 260  (Principal office strest acksonville, FL 32216  (Current mailing address)  Name:  Law Office of Michael B, Bittner  4238 Salisbury Road North, Stc. 202  Jacksonville	(Enter name of corporation; must include "INCORPORATED." "COMPANY," "CORPORATION."  "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.")  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busin Delaware  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date of incorporation)  (Date of duration, if other than perform to registration)  (SEE SECTIONS 607.1501 & 607.1502. F.S., to determine penalty liability)  (Principal office street address)  acksonville, FL 32216  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Law Office of Michael B. Bittner  4238 Salisbury Road North, Stc. 202  Jacksonville  Jacksonville  Florida  32216	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in FDelaware  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of incorporation)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  acksonville, FL 32216  (Current mailing address, if different)  Name:  Law Office of Michael B, Bittner  4238 Salisbury Road North, Stc. 202  Jacksonville  Florida  Jacksonville	

## 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. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and 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 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>.</b>					
□Chairman	Christopher Freedman	□Chairman	Name:			
□Vice Chairman	Address: 4215 Southpoint Blvd., Ste. 260	□Vice Chairman	4215 Southpoint Boulevard, Ste. 2			
Director	Jacksonville, FL 32216	Director	Jacksonville, FL 32216			
■ President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	■ Secretary	<b>■</b> Treasurer			
Other	Other	■Other CFO	□Other			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President		□President				
□Vice President		□ Vice President	N ===			
□Secretary	□Treasurer	☐ Secretary	□ Treasurer			
□Other	Other	□Other	— Gother — G			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	<del></del>	Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐Secretary	□Treasurer			
□Other	□Other	□Other				
12. CHRA  The officer or direc	Jse an attachment to report more than six (6). The at added to the index when filing your Florida Departs  Signature of Director tor signing this document (and who is listed in numlese information submitted in a document to the Departs	r or Officer ber 11 above) affirms that	out form.			
13. Christopher f	Freedman, CEO, President, Director					

Page 1



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

DELAWARE, DO HEREBY CERTIFY "CONFIRMAME 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 TWELFTH DAY OF MAY, A.D. 2021.



Authentication: 203191081

Date: 05-12-21

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