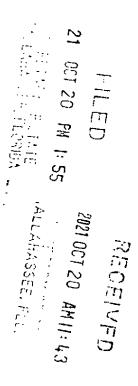
F24000006047

(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				





600374870266





CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 102125 8358504

AUTHORIZATION :

COST LIMIT : \$ (70, 9.0

ORDER DATE: October 13, 2021

ORDER TIME : 8:36 AM

ORDER NO. : 102125-005

CUSTOMER NO: 8358504

FOREIGN FILINGS

NAME: HARNESS TALENT INC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

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.

1. HARNESS TA	LENT INC.			
(Enter name of c	corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATI	ON."	
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transac	ting business in Florida)	
Delaware				
(State or count) 09/27/2021	y under the law of which it is incorporated) 5			
4. (Date of incorporation) 5. (Date of duration, if other than pe				
7 1331 BRICKEL	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502 L BAY DRIVE, UNIT 1909, MIAMI, FL 33133	, F.S., to determine penalty liab	pility)	
	(Principal office	street address)		
	(Current mailing a	ddress, if different)	21	
8. Name and street	et address of Florida registered agent: (P.O. E	Box NOT acceptable)	- 1 00 m	
Name:	Corporation Service Company	_	11 E	
Office Address:	1201 Hays Street			
	Tallahassee	, Florida	1: 55 1: 55	
	(City)	(Zip code)	01	

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.

(Registered agent'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.

A. DIRECTORS						
□Chairman	Name: MARIA LUISA MARTINEZ HENAO	□Chairman	Name:			
□Vice Chairman	Address: 1331 BRICKELL BAY DRIVE, UNIT 1909	□Vice Chairman	Address:			
Director		Director				
□President	MIAMI, FL 33133	□President				
□Vice President		■ Vice President				
☐ Secretary	☐ Treasurer	□Secretary		□Treasurer		
Other CEO	Other	□Other	 .	□Other		
□Chairman	Name	□ Chairman	\			
	Name:	□Chairman		· · · · · · · · · · · · · · · · · · ·		
	Address:	□Vice Chairman	Address:			
Director		□Director				
□President		□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		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when fiting your Florida Department of State Annual Report form. 12. Signature of Director or Officer						
	Signature of Difector-of	OTHER				

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.

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HARNESS TALENT 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 THIRTEENTH DAY OF OCTOBER, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HARNESS TALENT INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2021.

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



Authentication: 204398267

Date: 10-13-21