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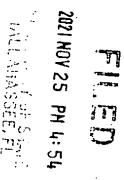
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: | Registration Section | | | | | | |
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| | S.E.L.F. TV STF | | | | | | |
| SUB. | JECT: | | | | | | |
| | | Name of corporat | ion - mi | ist include suffix | | | |
| Dear | Sir or Madam: | | | | | | |
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| norph | neus880@icloud.com | | | | | | |
| | E-1 | mail address: (to be use | d for fu | ture annual report r | otification) | | |
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| For fi | urther information conce | rning this matter, pleas | e call: | | | | |
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| Jerry (| C Adams Jr | 727 | . 6 | 43-17 <u>2</u> 3 | | | |
| | Name of Person | at (Area C |) 'oda | Davtime Telep | hone Number | - | |
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| STREET/COURIER ADDRESS: | | | | MAILING ADDRESS: Registration Section | | | |
| Registration Section Division of Corporations | | | | Division of Corporations | | | |
| The Centre of Tallahassee | | | | P.O. Box 6327 | | | |
| 2415 N. Monroe Street, Suite 810 | | | | Tallahassee, FL 32314 | | | |
| | Tallahassee, FL 3230 | • | | , | | | |
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| | osed is a check for the fo make check payable to: F | | NT OF | STATE | | | |
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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. S.E.L.F. TV Streaming Inc. 1. (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 business in Florida) 87-3223451 (FEI number, if applicable) (State or country under the law of which it is incorporated) 10/21/21 (Date of duration, if other than perpetual) (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) 8 The Green, Ste R., Dover, DE 19901 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Jerry C. Adams, Jr. Name: 2947 Suncoast Blend Dr. Office Address: Odessa _____, Florida (City) (Zip code) 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 | Jerry C. Adams, Jr. | | Jerry C. Adams, Jr. |
|--------------------|--|------------------------|---|
| □Chairman | Name: | □Chairman | Name: |
| □Vice Chairman | 2947 Suncoast Blend Dr Address: | □Vice Chairman | 2947 Suncoast Blend Dr Address: |
| | Odessa, FL33556 | | Odessa, FL 33556 |
| ☐ Director | | □Director | |
| President | | □President | |
| □Vice President | | □Vice President | |
| Secretary | □Treasurer | Secretary | ☐Tr ca surer |
| □Other | Other | Other | □Other |
| | Jerry C Adams, Jr. | | Jerry C Adams, Jr. |
| □Chairman | Name: | □Chairman | Name: 2947 Suncoast Blend Dr |
| □Vice Chairman | Address:Odessa, FL 33556 | □Vice Chairman | Address: Odessa, FL |
| □ Director | | Director | Out.isa, 11. |
| □President | | □President | |
| □Vice President | | □Vice President | |
| □ Secretary | ■ Treasurer | ☐ Secretary | □Treasurer |
| □Other | | □ Other | Name: |
| | | | 2 |
| □Chairman | Name: | □ Chairman | |
| □Vice Chairman | Address: | □Vice Chairman | Address: O T |
| Director | | □Director | |
| □President | | □President | 17 v |
| □Vice President | | □Vice President | |
| ☐ Secretary | □Treasurer | ☐ Secretary | □Treasurer |
| Other | □Other | □Other | |
| individuals may be | Use an attachment to report more than six (6). The attachment to report more than six (6). The attachment to the index when filing your Florida Department of Director of Signature of Director of Dir | ent of State Annual Re | d for reporting purposes only. Non-indexed sport form |

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.

Jerry C Adams Jr., President



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

DELAWARE, DO HEREBY CERTIFY "S.E.L.F. TV STREAMING 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 NOVEMBER, A.D.

2021.

2021 NOV 25 PM 4: 54



Authentication: 204738677

Date: 11-18-21