# F2200001279

(Requestor's Name)			
(Address)			
A)	address)		
(0	City/State/Zip/Phone #)		
PICK-UP	MAIL MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only



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SMETALLAHASSEE

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GA

S. HAWKES FEB \_ = 2021

## CORPORATE ACCESS, \_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### WALK IN

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	PIC	K UP:	3/3 DANNY	<del></del>	
	CERTIFIED COPY				
XX	РНОТОСОРУ				
	CUS				
XX	FILING	FOR	EIGN INC		
1.	NOHO MODERN, INC				
	(CORPORATE NAME AND DOCU	JMENT #)			
2.					
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<b>6.</b> _	(CORPORATE NAME AND DOCU	JMENT #)			
SPECIAI		·			
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#### **COVER LETTER**

Division of C	Section Corporations		
SUBJECT: Noho N	fodern, Inc.		
	Name of corpo	ration - must include suffix	
Dear Sir or Madam:			
Certificate of Exister	ation by Foreign Corporationce," or "Certificate of Goodign corporation to transact b	l Standing" and check are si	sact Business in Florida," ubmitted to register the
Please return all corre	spondence concerning this n	natter to the following:	
Jessica von Heuss	·	Ü	
	Nan	e of Person	
Registered Agent Soluti	ons, Inc.		
	Firm	/Company	
5301 Southwest Pkwy S	Ste 400		
		Address	
Austin			
-	City/St	ate and Zip code	
lexi@thomashayesstudio			
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, ple	ase call:	
Alexis Forde	, 323	463-4434	
Name of Person	on at (at (	Code Daytime Tele	phone Number
Registration Se Division of Co The Centre of	rporations Tallahassee pe Street, Suite 810	MAILING A Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27
Enclosed is a check for Please make check payab \$70.00 Filing Fee	the following amount: le to: FLORIDA DEPARTM  \$78.75 Filing Fee & Certificate of Status	ENT OF STATE  \$78.75 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.

"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")		
(If name unavai	able in Florida, enter alternate corporate name	adopted for the purpose of transac	ting business in Florida)
California	3	26-0466248	
(State or count 07/01/2007	y under the law of which it is incorporated)	(FEI number, if	
(Date of incorporation)		(Date of duration, if other than perpetual)	
	(SEE SECTIONS 607.1501 & 607.11	n Florida, if prior to registration) 502, F.S., to determine penalty liab	oility)
162 Santa Mon	ca Bivd, Los Angeles, CA 90038		
	(Principal off	ce street address)	<del></del>
			- e :
	(Current mailin	ig address, if different)	- 3
			•
Name and stree	t address of Florida registered agent. (D.C	) Boy NOT accompla)	
	t address of Florida registered agent: (P.C Registered Agent Solutions, Inc.	). Box <u>NOT acceptable</u> )	ن دل ۱
Name and <u>stre</u> Name:	Registered Agent Solutions, Inc.	). Box <u>NOT acceptable)</u>	
Name:	Registered Agent Solutions, Inc.  155 Office Plaza Dr., Ste A		
Name:	Registered Agent Solutions, Inc.  155 Office Plaza Dr., Ste A		-3 MI 9: 35
	Registered Agent Solutions, Inc.  155 Office Plaza Dr., Ste A		-3 M 9: 35
Name: fice Address:  Registered ag ving been nan ignated in this ther agree to c	Registered Agent Solutions, Inc.  155 Office Plaza Dr., Ste A	, Florida 32301 (Zip code)  ce of process for the above statement as registered agent and agelative to the proper and comp	ed corporation at the pla tree to act in this capacit

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS			
□ Chairman	Name:	□ Chairman	Name:
☐ Vice Chairman	Address:	□Vice Chairman	Address:
Director	Los Angeles, CA 90038	Director	Los Angeles, CA 90038
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
□ Chairman	Name:	□Chairm <b>a</b> n	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 individuals may b	: Use an attachment to report more than six (6). The attoe added to the index when filing your Florida Department.	eachment will be imagnent of State Annual F	ed for reporting purposes only. Non-indexed teport form.
12.			J
<u>-</u>	Signature of Director	or Officer	
The officer or dir she is aware that s.817.155, F.S.	rector signing this document (and who is listed in numb false information submitted in a document to the Depa	per 11 above) affirms turtment of State constitution	that the facts stated herein are true and that he of tutes a third degree felony as provided for in
12	Stanille 1	rurie D	;
13	(Typed or printed name and capacity of per	son signing application	on)



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

Entity Name: NOHO MODERN, INC.

File Number: C3004724 Registration Date: 07/01/2007

Entity Type: DOMESTIC STOCK CORPORATION

Jurisdiction: CALIFORNIA

Status: ACTIVE (GOOD STANDING)

As of February 28, 2022 (Certification Date), 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 as of the Certification Date 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 March 1, 2022.

SHIRLEY N. WEBER, Ph.D. Secretary of State

Certificate Verification Number: RP8DGEM

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at <u>bebizfile.sos.ca.gov/certification/index</u>.