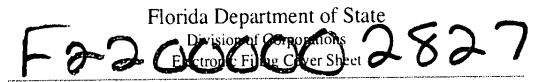
⊙ 05/05/2022 1:20 PM





Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000163479 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

 Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION TIC Holdco Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu Corporate Filing Menu

Help

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.

	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"			
(If name unavaila	ble in Florida, enter alternate corporate name ad-	opted for the purpose of transacting but	siness in Florida)		
Delaware 2.	3.				
(State or country	y under the law of which it is incorporated)	(FEI number, if applica	ble)		
10/29/2014 4.	5.				
(Date	of incorporation) 5.	(Date of duration, if other than	on, if other than perpetual)		
6		_			
J	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	lorida, if prior to registration) 2, F.S., to determine penalty liability)			
222 Lakeview A	venue, Suite 1660 West Palm Beach, FL 33401				
/	(Principal office	street address)			
	(Current mailing	address, if different)	202) 	
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	2022 HAY -5		
Name:	United Agent Group Inc.				
	801 US Highway I		A	0,	
Office Address:		12100	<u> </u>		
		, Florida			
	(City)	(Zip code)			
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to accept service sapplication, I hereby accept the appointme comply with the provisions of all statutes rel r with and accept the obligations of my posi Ashley Perkins,	ent as registered agent and agree to ative to the proper and complete po	act in this capa	city. I	

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.

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

A. DIRECTORS				
□Chairman	Wayne Barr, Jr.	□Chairman	Name: Joseph A. Ferraro	
□Vice Chainnan	Address: 222 Lakeview Avenue, Suite 1660	□Vice Chairman	Address: 222 Lakeview Avenue, Suite 1660	
Director	West Palm Beach, FL 33401	Director	West Palm Beach, FL 33401	
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	Secretary	☐Treasurer	
■Other CEO	Other	Other Assistan	t Secretary	
□Chairman	Michael J. Sena	□Chairman :	Jeanne E. Rouleau Name:	
	Address: 222 Lakeview Avenue, Suite 1660	☐ Vice Chairman	222 Lakeview Avenue, Suite 1660	
Director	West Palm Beach, FL 33401	Director	West Palm Beach, FL 33401	
□President		□President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	☐Secretary	☐ Treasur er	
Other Chief F	inancial Officer Other	Other Assistan	t Secretary Other	
□ Chairman	Name: Avram A. Glazer	□Chairman	Suzi R. Herbst	
	Address: 222 Lakeview Avenue, Suite 1660	□Vice Chairman	222 Lakevious Avenue Suite 1660	
Director	West Palm Beach, FL 33401	Director	West Palm Beach, FL 33401	
□President		□President		
□Vice President		□Vice President		
Secretary	□Treasurer	□ Secretary	□Treasurer	
□Other	Other	□Other	□Other	
individuals may b	Use an attachment to report more than six (6). The at e added to the index when filing your Florida Departm	tachment will be imag nent of State Annual R	ed for reporting purposes only. Non-indexed epon form.	
12.	Signature of Director	r or Officer		

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 of 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.

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "TIC HOLDCO 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 FIFTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TIC HOLDCO INC."

WAS INCORPORATED ON THE TWENTY-NINTH DAY OF OCTOBER, A.D. 2014.

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

at corp.delaware.gov/auth

Authentication: 203350838

Date: 05-05-22