× 2200000 0 4527

(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:						

Office Use Only



400390756234

07/12/22--G1016--G18 **78.75

2022 July 12 PH 3: 23

S. FRANKLIN
JUL 2 0 2022

COVER LETTER

TO:	Registration Division of 0	Section Corporations					
SUBJ	FCT: Starfis	sh Specialty Program	ns Holdings Co	orp.			
3013	Le1	Nar	ne of corporat	ion - mus	include suffix	· · ·	· · · · · · ·
Dear S	ir or Madam:						
"Certif	ficate of Existe	ication by Foreign ence," or "Certific reign corporation	ate of Good S	standing" :	rization to Transac and check are subi lorida.	et Business in Flo mitted to register	orida," the
Please	return all corr	espondence conc	erning this ma	tter to the	following:		
Darrell	Belch						
			Name	of Person			
3H Co	rporate Services	s, LLC					
			Firm/C	Company			
36 Lon	ig Alley						
			A	idress			2622 314.
			City/Sta	te and Zip	code		
Sarato	ga Springs, NY						12
		E-mail add	ress: (to be us	ed for futu	ire annual report n	otification)	д: -
For fu	rther informat	ion concerning th	is matter, plea	se call:			ယ္ 23
Darrell	l Belch		518	583	3-0639 Ext. 125 Daytime Telepl		
	Name of Pe	erson	Area	Code	Daytime Telepl	hone Number	_
	Registration Division of The Centre	Corporations of Tallahassee once Street, Suite			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	
Please	sed is a check make check pay 0.00 Filing Fee		A DEPARTMI	□ \$ 78.	FATE 75 Filing Fee & ified Copy	S87.50 Fili Certificate Certified C	of Status 8

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.

If name unavail	able in Florida, enter alternate corporate name ac	•	
Delaware	3	(FEI number, if applicab	
State or counti	y under the law of which it is incorporated)	(FEI number, if applicat	ole)
08/06/2021	of incorporation) 5	·	
(Date	of incorporation)	(Date of duration, if other than p	erpetual)
	(Current mailing	address, if different)	
	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	_	Box <u>NOT</u> acceptable)	2022
Name:	et address of Florida registered agent: (P.O. 3H Agent Services, Inc.		2022 .114. 1
	et address of Florida registered agent: (P.O. 3H Agent Services, Inc. 1415 Panther Lane, Suite 327	Box NOT acceptable)	2022 Jrii, 12 PH

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.

-DocuSign Envelope ID: E0A4BF57-4EFD-4688-ADBA-C5E7EF98A7A9

A. DIRECTORS **Brooks Chase** Thomas Lane □ Chairman □ Chairman 200 Continental Drive, Suite 401 200 Continental Drive, Suite 401 □Vice Chairman Address: □ Vice Chairman Address: Newark, DE 19713 Newark, DE 19713 Director ■ Director President □President □Vice President ___ ☐ Vice President ☐Treasurer □Treasurer □ Secretary ☐ Secretary □Other _____ □Other _____ □Other ____ Other _____ Name: Michael Thabet Margret McBurney ☐ Chairman □ Chairman 200 Continental Drive, Suite 401 200 Continental Drive, Suite 401 Address: _ □Vice Chairman □Vice Chairman Address: Newark, DE 19713 Newark, DE 19713 □Director Director □President □ President □Vice President ☐ Vice President _____ ☐Treasurer □Treasurer ■ Secretary □ Secretary □ Other □Other ______ □Other _____ Name: Jeremy Hitzig James Flynn □Chairman Chairman 200 Continental Dft №, Suite 401 200 Continental Drive, Suite 401 ☐Vice Chairman □Vice Chairman Address: Address: Newark, DE 19713 Newark, DE 19713 □Director ☐ Director □President President □ Vice President □Vice President ___ □Treasurer Treasurer □ Secretary □ Secretary CEO CEO □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 filing your Florida Department of State Annual Report form. 1 James Flynn Signature of Director or Officer -EC45381C7E4B4FC...

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.

James Flynn

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "STARFISH SPECIALTY PROGRAMS HOLDINGS

CORP." 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 TWENTY-EIGHTH DAY OF

JUNE, A.D. 2022.

2022 JUL 12 PH 3: 23



Authentication: 203794045

Date: 06-28-22