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COVER LETTER

| TO: | Registration Section Division of Corpor | | | | |
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| SUBJ | ECT: | On Chain | Listing | s, Inc. | |
| | | Name of corporat | ion - m | ust include suffix | |
| Dear S | ir or Madam: | | | | |
| 'Certi | ficate of Existence," | | tanding | norization to Transact Business " and check are submitted to re Florida. | |
| Please | return all correspond | dence concerning this mat | tter to th | ne following: | |
| | • | Adam J. ' | | • | |
| | | Name | of Pers | on | |
| | | Yorma | ick Law | , | |
| - | | Firm/C | ompany | / | |
| | | 121 Alhambra | a Plaza, | Suite 1500 | |
| | | Ad | dress | | ~~~ |
| | | Coral Ga | bles, F | _ 33134 | 2622 JUG |
| | | City/State | e and Z | ip code | |
| | | adam@yor | mackla | w.com | -2 |
| | | E-mail address: (to be use | d for fu | ture annual report notification |) m |
| For fu | ther information cor | ncerning this matter, pleas | e call: | | म् मः अ |
| Α | dam J. Yormack, Es | iq at (786 |) | 634-6055 | |
| • | Name of Person | Arca C | ode – | Daytime Telephone Numb | oer |
| | STREET/COURI Registration Section Division of Corpor The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32 | n ations ahassee treet, Suite 810 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | |
| lease i | | following amount: : FLORIDA DEPARTME:] \$78.75 Filing Fee & Certificate of Status | □ \$78 | 3.75 Filing Fee & S87.5 rtified Copy Certi | 60 Filing Fee, ficate of Status & fied 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.

| (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) 121 Alhambra Plaza, Suite 1500, Coral Gables, FL 33134 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Adam J. Yormack, Esq. Principal office Address: 121 Alhambra Plaza, Suite 1500 Coral Gables Florida 33134 (City) Registered agent's acceptance: 32 Adam J. Yormack accept service of process for the above stated corporation at the | (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business. Delaware (State or country under the law of which it is incorporated) (FEI number, if applicable of duration, if other than perpose of transacted business in Florida, if prior to registration) (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) 121 Alhambra Plaza, Suite 1500, Coral Gables, FL 33134 (Principal office street address) | e) |
|--|---|------------------|
| Delaware 3. 882963442 (State or country under the law of which it is incorporated) (FEI number, if applicable) 6/21/22 5. (Date of incorporation) (Date of duration, if other than perpetual) | Delaware 3. 882963442 | e) |
| Delaware 3. 882963442 (State or country under the law of which it is incorporated) (FEI number, if applicable) 6/21/22 5. (Date of incorporation) (Date of duration, if other than perpetual) | Delaware 3. 882963442 | e) |
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| Name: Adam J. Yormack, Esq. Street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Adam J. Yormack, Esq. Street address: 121 Alhambra Plaza, Suite 1500 Coral Gables Florida 33134 (City) (Zip code) Street agent's acceptance: Street agent's acceptance: Street agent and to accept service of process for the above stated corporation at the | (Current manning address, if different) | |
| Name: Adam J. Yormack, Esq. 121 Alhambra Plaza, Suite 1500 | | |
| Coral Gables Coral Gables (City) (C | Name and street address of Florida registered agent: (P.O. Box NOT acceptable) | . . |
| Coral Gables Coral Gables (City) (C | Name: Adam J. Yormack, Esq. | <u>)</u> ê22 |
| Coral Gables Coral Gables (City) (C | | 7 7 7 |
| Coral Gables (City) (City) (Zip code) Registered agent's acceptance: | office Address: 121 Alhambra Plaza, Suite 1500 | -2 |
| Registered agent's acceptance: $\overset{\div\cdot}{\varpi}$ laving been named as registered agent and to accept service of process for the above stated corporation at the | Coral Gables Florida 33134 | <u></u> |
| . Registered agent's acceptance: $\overset{\textstyle \hookrightarrow}{\thickapprox}$ laving been named as registered agent and to accept service of process for the above stated corporation at the | (City) (Zip code) | |
| laving been named as registered agent and to accept service of process for the above stated corporation at the | Registered agent's acceptance: | ు |
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| urther agree to comply with the provisions of all statutes relative to the proper and complete performance of m nd Lam familiar with and accept the obligations of my position as registered opent. | na i um jumitiur with and accept the obligations of my position as registered agent. | |
| irther agree to comply with the provisions of all statutes relative to the proper and complete performance of m nd I am familiar with and accept the obligations of my position as registered agent. | | |
| | Adam Q. Gormack, Eg. | |
| nd I am familiar with and accept the obligations of my position as registered agent. | (Registered agent's signature) | |
| | (C | |

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.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS Name: Adam Yormack Name: Tory Ricalis □ Chairman □Chairman Address: __121 Alhambra Plaza 121 Alhambra Plaza □Vice Chairman Address: _ □ Vice Chairman **Suite 1500** Director Suite 1500 Coral Gables, FL 33134 Coral Gables, FL 33134 □President □ President □Vice President □Vice President ☐ Secretary ☐Treasurer ☐ Secretary □ Treasurer □Other Other □Other □Other Neel Kawale Richard Swerdlow □ Chairman Name: □ Chairman Name: 121 Alhambra Plaza 121 Alhambra Plaza □ Vice Chairman Address: □ Vice Chairman Address: Suite 1500 Suite 1500 Director **☆**Director Coral Gables, FL 33134 Coral Gables, FL 33134 □President □President □ Vice President ____ □ Vice President □ Secretary ☐ Treasurer ☐ Secretary □ Treasurer □Other ____ □Other _____ □Other ☐Other _____ Name: _____ ☐ Chairman 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 filing your Florida Department of State Annual Report form. 12. Adam Gormack Signature of Director 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 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.

Adam Yormack, Director



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

DELAWARE, DO HEREBY CERTIFY "ON CHAIN LISTINGS, 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 TWENTY-SEVENTH DAY OF JULY, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ON CHAIN LISTINGS, INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

28 th 38



Authentication: 204020134

Date: 07-27-22