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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

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## FOREIGN PROFIT/NONPROFIT CORPORATION Mileage Club Wear, Inc.

Certificate of Status	0
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S. FRANKLIN

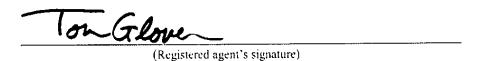
AUG 2 3 2022

## 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.

	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	lable in Florida, enter alternate corporate name a	dopted for the purpose of transacting busin	ess in Florida)
, Californ	ia ,		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
04/17/2000 5			
	e of incorporation)	(Date of duration, if other than perpetual)	
6.			
·			
	(Date first transacted business in		
222 Nort	(SEE SECTIONS 607.1501 & 607.150	22, F.S., to determine penalty liability)	
, 332 Nort	(SEE SECTIONS 607.1501 & 607.150 th Park Avenue, Winter F	Park, FL 32789	2
	(SEE SECTIONS 607.1501 & 607.1501) The Park Avenue, Winter F	Park, FL 32789 e street address)	2022
	(SEE SECTIONS 607.1501 & 607.1501 th Park Avenue, Winter F (Principal offic Park Avenue, Winter Park, FL 3	Park, FL 32789 e street address)	2022
	(SEE SECTIONS 607.1501 & 607.1501 th Park Avenue, Winter F (Principal offic Park Avenue, Winter Park, FL 3	Park, FL 32789 e street address)	. 2
332 North	(SEE SECTIONS 607.1501 & 607.1502)  The Park Avenue, Winter Formation (Principal office)  Park Avenue, Winter Park, FL 3  (Current mailing)	Park, FL 32789 e street address) 32789 e address. if different)	:22:
332 North  8. Name and stre	(SEE SECTIONS 607.1501 & 607.1502)  The Park Avenue, Winter Form (Principal office Park Avenue, Winter Park, FL 3)  (Current mailing et address of Florida registered agent: (P.O.	Park, FL 32789 e street address) 32789 e address. if different)	. 22 Pii
332 North	(SEE SECTIONS 607.1501 & 607.1502)  The Park Avenue, Winter Form (Principal office Park Avenue, Winter Park, FL 3 (Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent LLC)	Park, FL 32789  e street address)  address. if different)  Box NOT acceptable)	. 22 Pi 3:
332 North  8. Name and stre	(SEE SECTIONS 607.1501 & 607.1502)  The Park Avenue, Winter Form (Principal office Park Avenue, Winter Park, FL 3)  (Current mailing et address of Florida registered agent: (P.O.	Park, FL 32789  e street address)  address. if different)  Box NOT acceptable)	. 22 P.1 3:
332 North  8. Name and stre  Name:	(SEE SECTIONS 607.1501 & 607.1502)  The Park Avenue, Winter Form (Principal office Park Avenue, Winter Park, FL 3 (Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent LLC)	Park, FL 32789  e street address)  address. if different)  Box NOT acceptable)	. 2

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.



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							
□Chairman	Name: Shmuel Zak	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
XI Director	3045 Aloma Avenue Apt 314	□Director					
<b>X</b> President	Winter Park FL 32792	□President					
□Vice President		□Vice President					
<b>∑</b> Secretary	<b>☆</b> Treasurer	☐ Secretary		□Treasurer			
□Other	□Other	⊡Other	<del></del>	□Other			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	Treasurer	□ Secretary		☐Treasurer [2]			
□Other	□Other	□Other	<del></del>	□Other			
			N	22 FII			
□Chairman	Name:	□Chairman		ب . ب			
□Vice Chairman	Address:	□Vice Chairman	Address:	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>			
□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.  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.

33. SHMUEL ZAK, President



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

Entity Name: MILEAGE CLUB WEAR, INC.

Entity No.: 2051172 Registration Date: 04/17/2000

Stock Corporation - CA - General Entity Type:

CALIFORNIA Formed In:

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all 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 date of this certificate and does not reflect documents that are pending review or other events that may impact 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 August 17, 2022.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 038073633

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.