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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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COVER LETTER

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| TO: | Registration Se Division of Cor | | | | | | |
|--|--|---------------------|--------------------------|-------------------|--|---|------------------|
| SHR | JECT: | | STUART WE | HTMAN | I.INC. | | |
| 300. | mer | Name | of corporatio | n - mus | t include suffix | | |
| Dear S | Sir or Madam: | | | | | | |
| "Certi | | e." or "Certificate | of Good Sta | nding" : | and check are sub | et Business in Florid mitted to register the | |
| Please | return all corresp | ondence concern | ing this matte | r to the | following: | | 2022 : 11 22 |
| SCOT | T L. WHITMAN | | | | | | , ` |
| | | - | Name of | Person | | - | ~ ``` |
| SCOT | T L. WHITMAN, I | NC. | | | | | 2 |
| | - | | Firm/Cor | npany | · · · · · · · · · · · · · · · · · · · | | |
| 6310.5 | SAN VICENTE BL | VD., SUITE 430 | | | | | ب |
| | | | Addı | ress | | - | س |
| LOS | ANGELES, CALIF | ORNIA 90048 | | | | | |
| | | | City/State | and Zip | code | | |
| slw@i | mwlegal.com | | | | | | |
| | | E-mail address | s: (to be used | for futt | ire annual report i | otification) | |
| For fu | rther information | concerning this n | natter, please | call: | | | |
| SCOT | T L. WHITMAN | | at (310 |) | 477-5577 | | |
| | Name of Perso | n | Area Coo | de | Daytime Telepl | hone Number | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | |
| Please | sed is a check for make check payabl 0.00 Filing Fee | | EPARTMEN ng Fee & - [| □ \$78 <i>.</i> 1 | FATE 75 Filing Fee & fied Copy | S87.50 Filing Certificate of Certified Cop | Status & |

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 unavail | able in Florida, enter alternate corporate name | adopted for the purpose of transacting business in Florida | | | |
| CALIFORNIA | | (FEI number, if applicable) | | | |
| (State or countr | y under the law of which it is incorporated) | | | | |
| 04/14/1965 | 5. | 5. PERPETUAL (Date of duration, if other than perpetual) | | | |
| (Date | of incorporation) | | | | |
| | | | | | |
| | (Date first transacted business in (SEE SECTIONS 607.1501 & 607.1) | a Florida, if prior to registration) 502, F.S., to determine penalty liability) ALIFORNIA 90048 | | | |
| 6310 SAN VICE | NTE BLVD., SUITE 430, LOS ANGELES, C | ALIFORNIA 90048 | | | |
| | (Principal offi | <u></u> | | | |
| | (Current mailir | og address. if different) | | | |
| Name and stree | et address of Florida registered agent: (P.C | | | | |
| Name: | REGISTERED AGENTS INC. | | | | |
| ffice Address: | 7901 4TH ST. N. SUITE 300 | | | | |
| | ST. PETERSBURG | . Florida 33702 | | | |
| | (City) | (Zip code) | | | |

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.

Registered agent's signature)

40. 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: _ | SCOTT L. WHITMAN | ☐ Chairman | Name: | | | | |
|---|----------|------------------------|-----------------|-------------|---------------|--|--|--|
| □Vice Chairman | Address: | 6310 SAN VICENTE BLVD. | □Vice Chairman | Address: | | | | |
| □Director | | SUITE 430 | Director | | | | | |
| □Presidem | | LOS ANGELES, CA 90048 | □President | | | | | |
| □Vice President | | | □Vice President | | | | | |
| ☐ Secretary | | □Treasurer | ☐ Secretary | | □Treasurer | | | |
| □Other | | □Other | □Other | | □Other | | | |
| □Chairman | Name: _ | J. JUSTIN WHITMAN | □Chairman | Name: | | | | |
| ■ Vice Chairman | Address: | 6310 SAN VICENTE BLVD. | □Vice Chairman | Address: | | | | |
| □Director | | SUITE 430 | □Director | | | | | |
| □President | | LOS ANGELES, CA 90048 | □President | | 2072 | | | |
| □Vice President | | | □Vice President | | , | | | |
| ☐ Secretary | | ☐Treasurer | □Secretary | | □Treasurer N | | | |
| □Other | <u>_</u> | □Other | □Other | | □Other □ | | | |
| □Chairman | Name: _ | KAENAN WHITMAN | □ Chairman | Name: | 7: 15 | | | |
| □Vice Chairman | Address: | 6310 SAN VICENTE BLVD. | □Vice Chairman | Address: | | | | |
| □Director | | SUITE 430 | □Director | | | | | |
| □President | | LOS ANGELES. CA 90048 | □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.

, SCOTT L. WHITMAN, CHAIRMAN



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

Entity Name: STUART WHITMAN, INC.

Entity No.: 0489197 **Registration Date:** 04/14/1965

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

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 11, 2022.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 036735829

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