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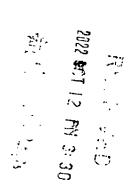
(Requestor's Name)	
(Address)		
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- (Crty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business Entity Name)	
	Document Number)	
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Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	

Office Use Only



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K. SALY 0CT 13 2022 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

			ACCOUNT NO). :	1200000	000195	
			REFERENC	Œ:	023163	7572690	
		AU	THORIZATIO)N :	Froull	Eleza.	1
			COST LIMI	T :	\$27000	,,,,,	
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PLEASE	E RETUF	N THE	FOLLOWING	AS PF	OOF OF F	'ILING:	
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EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

	stration Section sion of Corporations			
SUBJECT:	Orbis Holdco, Inc.			
2020201		me of corporation	- must include suffix	
Dear Sir or N	Aadam:			
"Certificate of	"Application by Foreigr of Existence," or "Certification aced foreign corporation	cate of Good Stan	ding" and check are sub	
Please return	all correspondence conc	erning this matter	to the following:	
Mark Siegel				
		Name of I	Person	
Orbis Holdco	, Inc.			
	·	Firm/Com	pany	
2041 Rosecra	ns Ave #245			
		Addre	SS	
EL Segundo,	CA 90245			
		City/State ar	nd Zip code	.
businessfiling	s@emeraldhs.com			
	E-mail add	ress: (to be used for	or future annual report i	notification)
For further in	formation concerning thi	s matter, please ca	all:	
Mark Siegel		at (917-5055	
Nam	e of Person	Area Code	Daytime Telep	hone Number
Regis Divis The 0 2415	EET/COURIER ADDR stration Section tion of Corporations Centre of Tallahassee N. Monroe Street, Suite hassee, FL 32303		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	ection orporations 7
	•	DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified 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.

nder the law of which it is incorporated) 3.	dopted for the purpose of transacting business in Florida) 81-5140283 (FEI number, if applicable)
nder the law of which it is incorporated)	(FEI number, if applicable)
	,
<u> </u>	
incorporation)	(Date of duration, if other than perpetual)
	(Sale of duration, if other than perpetual)
(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	Florida, if prior to registration) 2, F.S., to determine penalty liability)
(Principal office	street address)
(Current mailing	address if different)
	address, if different) Box NOT acceptable)
201 Hays Street	
allahassee	, Florida
(City)	(Zip code)
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 Suite 245 El Segundo, CA 90245 (Principal office (Current mailing) Iddress of Florida registered agent: (P.O. Corporation Service Company)

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.

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

A. DIRECTORS			Erik Miller
□ Chairman	Name: Mark Siegel 2041 Rosecrans Ave #245	□Chairman	Name:
☐ Vice Chairman	Address:	□Vice Chairman	Address: 2041 Rosecrans Ave #245
Director	El Segundo, CA 90245	Director	El Segundo, CA 90245
President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	■ Treasurer
□Other	Other	Other	Other
□ Chairman	Name: Larry Tarschis	□ Chairman	Brandon Deger
□Vice Chairman	Address: 2041 Rosecrans Ave #245	□Vice Chairman	Address: 2041 Rosecrans Ave #245
■Director	El Segundo, CA 90245	Director	El Segundo, CA 90245
□President		□President	
■Vice President		□Vice President	
☐ Secretary	☐ Treasurer	■ Secretary	□Treasurer
Other	Other	Other	Other
□Chairman	Name:	☐ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Name: Representation of the Address: Representation of the Address
□Director		□Director	<u> </u>
□President		□President	2 P
□Vice President		□Vice President	7.7.7.
☐Secretary	□Treasurer	☐ Secretary	□Treasurer S
Other	Other	□Other	Other
Important Notice: Undividuals may be:	ise an attachment to report more than six (6). The added to the index when filing your Florida Department of Direct Signature of Direct	attachment will be imaged rtment of State Annual Rep or or Officer	oort form.
she is aware that fal:	for signing this document (and who is listed in nurse information submitted in a document to the De	nber 11 above) affirms that	t the facts stated herein are true and that he
s.817.155, F.S. Mark Siegel,	President		

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ORBIS 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 TWELFTH DAY OF OCTOBER, 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 "ORBIS HOLDCO, INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF JANUARY, A.D. 2017.

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





Authentication: 204604626

Date: 10-12-22