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From:	Fax Number : (850)6	17-6383	- 11
110111.	Account Name : REGISTI	ERED AGENTS INC.	·
	Account Number : 1200900		•
	Phone : (307)20		į
	Fax Number : (855)3	30-1010	
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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.

(II name unavail	anie in Piorioa, Piner auernale comociaie ibune auc	ment for the number of trunches	na husinasa in	Elorida'
Delawai	70	pted for the purpose of transacti		1 IOTTUA
Ostate or country under the law of which it is incorporated)		(FEI number, if applicable)		
3/4/202	2			
(Date of incorporation) 5.		(Date of duration, if other than perpetual)		
•		,		
	(Date first transacted business in F			
	(SEE SECTIONS 607.1501 & 607.1502		lity)	
251 Little	e Falls Dr. Wilmington DE			
	/Principal office			
	, ,	street address)		
200 Specti	rum Center Dr., Suite 300 Irvine	CA 92618		
200 Specti	rum Center Dr., Suite 300 Irvine	<u> </u>	{1	202
<u> </u>	rum Center Dr., Suite 300 Irvine (Current mailing a	CA 92618 ddress. if different)	{ t } 	2022 00
<u> </u>	Current mailing a ct address of Florida registered agent: (P.O. I	CA 92618 ddress. if different)		2022 OCT 2
<u> </u>	rum Center Dr., Suite 300 Irvine (Current mailing a	CA 92618 ddress. if different)		2022 00T 25
Name and stre	Current mailing a ct address of Florida registered agent: (P.O. I	CA 92618 ddress. if different)		
Name and stre	ct address of Florida registered agent: (P.O. I Registered Agents Inc 7901 4th St N STE 300	CA 92618 ddress. if different)		2022 OCT 25 MillO: 4

(Registered agent's signature)

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:	Chairman	Name: Steven Wolfe
□Vice Chairman	Address:	□ Vice Chairman	919 W Tida St. Address:
Director	Cowpet Bay Estate	Director	Meridian, ID 83646
President	St. Thomas, U.S. Virgin Islands, 00802	☐ President	
□Vice President		■Vice President	
Secretary	☐ Treasurer	Secretary	[] Treasurer
		□ Other	Other
□Chairman □Vice Chairman	Sorin Chira Name: 10 Toscany Address:		Name:
Director	Irvine, CA 92614	Director	
President		□ President	
□Vice President		□ Vice President	
Secretary	☐Treasurer	Secretary	☐Treasurer
Other Chief Tec	hnical Officer Dother	□ Other	C] Other
☐Chairman	Name:	Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
□President		☐ President	
□Vice President		☐ Vice President	
Secretary	[]Treasurer	Secretary	☐ Treasurer
□Other		Other	Other
The officer or dire she is aware that fs.817.155, F.S.	Use an attachment to report more than six (6). The cadded to the index when filing your Florida Depa Signature of Director signing this document (and who is listed in nualse information submitted in a document to the Defie, Executive Vice President	rtment of State Annual Re tor or Officer mber 11 above) affirms th	eport form. The facts stated herein are true and that he or

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

DELAWARE, DO HEREBY CERTIFY "COREIP HOLDINGS, 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 FIRST DAY OF OCTOBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COREIP HOLDINGS, INC." WAS INCORPORATED ON THE FOURTH DAY OF MARCH, A.D. 2022.

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

Authentication: 204527485

Date: 10-01-22