

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**F230000002133**

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)214-8442

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Samplize Corp.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2023 APR 12 AM 10:06

FILED

2023 APR 12 PM 4:50

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

A. Jones

**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.*

1. Samplize Corp.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Tennessee 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/9/2017 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3651 FAU Blvd., Suite 200, Boca Raton, FL 33431  
(Principal office street address)

\_\_\_\_\_  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporate Creations Network, Inc.  
Office Address: 801 US Highway 1  
North Palm Beach, Florida 33408  
(City) (Zip code)

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2023 APR 12 AM 10:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

*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.*



Kevin Duteau, Special Secretary

(Registered agent's signature)

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

☐Chairman

Name: Neal Winneg

☐Vice Chairman

Address: 3651 FAU Blvd., Suite 200

☒Director

Boca Raton, FL 33431

☐President

☒Vice President

☒Secretary

☐Treasurer

☐Other

☐Other

☐Chairman

Name: Samuel Hotchkiss

☐Vice Chairman

Address: 3651 FAU Blvd., Suite 200

☒Director

Boca Raton, FL 33431

☐President

☒Vice President

☐Secretary

☐Treasurer

☒Other

Asst. Treasurer

☐Other

☐Chairman

Name: Adam Sandow

☐Vice Chairman

Address: 3651 FAU Blvd., Suite 200

☐Director

Boca Raton, FL 33431

☒President

☐Vice President

☐Secretary

☐Treasurer

☐Other

☐Other

☐Chairman

Name: Peter Fain

☐Vice Chairman

Address: 3651 FAU Blvd., Suite 200

☐Director

Boca Raton, FL 33431

☐President

☐Vice President

☐Secretary

☐Treasurer

☒Other

COO

☐Other

☐Chairman

Name: Stacy McLaughlin

☐Vice Chairman

Address: 3651 FAU Blvd., Suite 200

☐Director

Boca Raton, FL 33431

☐President

☐Vice President

☐Secretary

☐Treasurer

☒Other

CFO

☐Other

☐Chairman

Name:

☐Vice Chairman

Address:

☐Director

☐President

☐Vice President

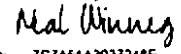
☐Secretary

☐Treasurer

☐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. 

76746113037246E

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.

13. Neal Winneg, VP and Secretary

(Typed or printed name and capacity of person signing application)



**Tre Hargett**  
Secretary of State

## Division of Business Services

### Department of State

State of Tennessee

312 Rosa L. Parks AVE, 6th FL

Nashville, TN 37243-1102

SAMPLIZE CORP.  
SUITE 200  
3651 FAU BLVD.  
BOCA RATON, FL 33431

April 5, 2023

Request Type: Certificate of Existence/Authorization  
Request #: 0524205

Issuance Date: 04/05/2023  
Copies Requested: 1

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#### Document Receipt

Receipt #: 008022780

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3848598556

\$20.00

Regarding: Samplize, Corp.

Filing Type: For-profit Corporation - Domestic

Formation/Qualification Date: 02/09/2017

Status: Active

Duration Term: Perpetual

Business County:

Control #: 888199

Date Formed: 02/09/2017

Formation Locale: TENNESSEE

Inactive Date:

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### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Samplize, Corp.

\* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;

\* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

\* has filed the most recent annual report required with this office;

\* has appointed a registered agent and registered office in this State;

\* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

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