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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NATIONAL LICENSING CONSULTANTS, LLC

Account Number : I20210000115 Phone : (954)233-0222 Fax Number : (813)441-8235

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 ALLEN CHRISTOPHER CORP.

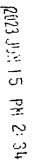
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то:		tration Secti ion of Corpo				
SUBJ	FCT.	ALLEN CH	RISTOPHER COF	₹₽.		
ЭОВа	LC1.		Name of	corporation -	- must include suffix	
Dear S	ir or M	adam:				
"Certif	īcate o	f Existence."	n by Foreign Con for "Certificate of corporation to tra	f Good Stand	ing" and check are sub	ct Business in Florida," omitted to register the
Please	return	all correspor	idence concernin	g this matter (to the following:	
AMAN	DA BR	UERLEY				
				Name of P	erson	· · · · · · · · · · · · · · · · · · ·
NATIC	DIWRO	E CONTRAC	TOR LICENSING	i		
				Firm/Comp	pany	
29157	CHAPE	L PARK DR	STE A			
				Addres	is .	
WESL	EY CIL	APEL, FL 33	543			
				City/State and	d Zip code	
STATE	ELICEN	SEINFO@G	MAIL.COM			
			E-mail address:	(to be used fo	r future annual report i	notification)
For fur	ther in	formation co	ncerning this ma	tter, please ca	II:	
AMAN	DA BR	HERLEY	a	954 t (233-0222	
	Name	e of Person		Area Code	Daytime Telep	hone Number
	Regis Divisi The C	tration Secti ion of Corpo Centre of Tal	rations Jahassee Street, Suite 810		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, I	Section orporations 7
Please i	nake ch	eck payable t	e following amounts: FLORIDA DEI \$78.75 Filing Certificate of	PARTMENT (Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate of Status & Certified Copy

Page: 3 of 5 2023-06-15 14:47:16 GMT 18134418235

From: ANGELA RAMSAY

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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.

(If name unavail	able in Florida, enter alternate corporate name ac	lupted for the purpose of transacting busine	ss in Florida)
CALIFORNIA	3. 2	0-5747956	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
10/20/2006	5	(Date of duration, if other than perp	
(Date of incorporation)		(Date of duration, if other than perpetual)	
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liability)	
3156 E LA PAL		, , ,	
3156 E LA PALI	MA AVESTEJ ANAHEIM, CA 92806	street address)	
3156 E LA PAL	MA AVESTEJ ANAHEIM, CA 92806 (Principal office	street address) address, if different)	
3156 E LA PAL	MA AVESTEJ ANAHEIM, CA 92806 (Principal office		2023
	(Principal office) (Current mailing) (et address of Florida registered agent: (P.O.	address, if different) Box NOT acceptable)	2023 JU
	MA AVESTEJ ANAHEIM, CA 92806 (Principal office (Current mailing	address, if different) Box NOT acceptable)	2023 JUH 15
. Name and <u>stree</u> Name:	(Principal office) (Current mailing) (et address of Florida registered agent: (P.O.	address, if different) Box NOT acceptable)	5
. Name and <u>stree</u>	(Current mailing et address of Florida registered agent: (P.O. NATIONAL LICENSING CONSULTANTS 29157 CHAPEL PARK DR STE A	address, if different) Box NOT acceptable)	

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.

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☐ Director ■ President	CHRISTOPHER HOSTERT Address: 3156 E LA PALMA AVE STE J ANAHEIM, CA 92806	□ Chairman □ Vice Chairman □ Director □ President ■ Vice President	Name: EDWARD LACIVITA Address: 3156 E LA PALMA AVE STE J ANAHEIM, CA 92806
☐ Secretary	©Treasurer	☐ Secretary	☐ Treasurer
□Other	Name:	□Other	□Other Name:
□ Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□ Vice President		□ Vice President	
□Secretary	☐Treasurer	□ Secretary	□Treasurer
☐Other	Other	□Other	□Uther □□
□Chairman	Name:	□Chairman	Name:
☐ Vice Chairman	Address:	□Vice Chairman	Address:
□Director		2Director	
□President		Il President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	☐ Treasurer
☐Other	Other	□Öther	Other
individuals may be occusioned by	ise an attachment to report more than six (6). The attachment to the index when filing your Florida Department 6/7/2023 8:19 Characterist Signature of Director	nent of State Annual Re PM PDT	

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.



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

Entity Name: ALLEN CHRISTOPHER CORP.

Entity No.: 2956621 Registration Date: 10/20/2006

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.

SEAL OF SEAL O

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 06, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 116609223

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.