F23000003982

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

| ~ | stration Section ion of Corporations | | | |
|---------------------------------|--|-------------------------------|---|--|
| SUBJECT | Greenhouse Agency, Inc. | | | |
| gonne. | Name (| of corporation - m | ust include suffix | |
| Dear Sir or M | ladam: | | | |
| "Certificate o | "Application by Foreign Co f Existence," or "Certificate ced foreign corporation to to | of Good Standing | " and check are subn | |
| Please return | all correspondence concerni | ng this matter to t | ne following: | |
| Sydney Huege | 1 | | | |
| | | Name of Pers | on | |
| Zeppos Law G | roup, LLP | | | |
| | | Firm/Compan | y . | <u>-</u> |
| 300 Spectrum | Center Drive, Suite 1550 | | | |
| | | Address | | |
| Irvine, CA 926 | 518 | | | |
| <u></u> | · | City/State and Z | ip code | |
| sydney@zeppo | | | | |
| | E-mail address | s: (to be used for fi | iture annual report no | otification) |
| For further in | formation concerning this m | natter, please call: | | |
| Sydney Huege | ·l | 949 | 727-1700 | |
| Nam | e of Person | Area Code | 727-1700 Daytime Teleph | one Number |
| Regis Divis The C 2415 | EET/COURIER ADDRES stration Section tion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303 | | MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, FI | ection rporations |
| | check for the following amoneck payable to: FLORIDA Ding Fee | EPARTMENT OF g Fee & □ \$7 | STATE 8.75 Filing Fee & ertified 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.

| Greenhouse Ag | gency, Inc. | | |
|------------------|---|--|--|
| | corporation; must include "INCORPORATED," "('orp," "Inc," "Co," or "Corp,") | COMPANY," "CORPORATION," | |
| (If name unavai | lable in Florida, enter alternate corporate name ado | pted for the purpose of transacting business in Florida) | |
| California | 3. | | |
| (State or count | ry under the law of which it is incorporated) | (FEI number, if applicable) | |
| 01/26/2005 | 5 | | |
| (Date | e of incorporation) | (Date of duration, if other than perpetual) | |
| | | | |
| 4100 Birch Stree | (Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, t, Suite 500, Newport Beach, CA 92660 | | |
| | (Principal office <u>s</u> | treet address) | |
| | (Current mailing ad | Idress, if different) | |
| Name and street | et address of Florida registered agent: (P.O. Bo | ox <u>NOT</u> acceptable) | |
| Name: | Name: Paracorp Incorporated | | |
| ffice Address: | 155 Office Plaza Drive, 1st Floor | - · · · · · · · · · · · · · · · · · · · | |
| | Tallahassee | Florida 32303 | |
| | (City) | (Zip code) | |

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.

July Mun, ASS+ Secretary, Paracorp Incorporated
(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.

A. DIRECTORS Sean Roche □ Chairman □ Chairman 4100 Birch Street, Suite 500 □Vice Chairman □Vice Chairman Address: Address: Newport Beach, CA 92660 □ Director ■ Director President □President □Vice President _____ ☐ Vice President ■ Treasurer □ Secretary □Treasurer ■ Secretary □Other _____ □Other _____ □ Chairman Name: Chairman Name: □Vice Chairman Address: _____ □Vice Chairman Address: □ Director □ Director □ President □President □ Vice President □ Vice President ☐Treasurer □Treasurer □ Secretary □ Secretary □Other _____ □Other _____ □Other _____ ☐Other _____ □ Chairman □ Chairman Name: Name: □ Vice Chairman Address: □ Vice Chairman Address: □ Director □ Director □President ☐ President □ Vice President ☐ Vice President □ Secretary ☐ Treasurer ☐ Secretary ☐Treasurer 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.

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.



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

Entity Name: GREENHOUSE AGENCY, INC.

Entity No.: 2719652 **Registration Date:** 01/26/2005

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 May 10, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 107062018

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.