

F2400001538

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number
(shown below) on the top and bottom of all pages of the document.

((H24000099674 3)))



H240000996743ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

Account Name : THE LICENSE COMPANY LLC
Account Number : I20210000181
Phone : (844)484-2466
Fax Number : (888)460-0045

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

Email Address: INFO@THELICENSECOMPANY.COM

2024 MAR 18 PM 3:16
E-G
RECEIVED

RECEIVED

2024 MAR 18 PM 3:16

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

Holiday Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help T. LEMIEUX
MAR 19 2024



March 15, 2024

FLORIDA DEPARTMENT OF STATE

Division of Corporations

THE LICENSE COMPANY LLC

SUBJECT: HOLIDAI INC

REF: W24000042219

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

If you have any further questions concerning your document, please call (850) 245-6051.

Andrea Andrews
Regulatory Specialist II
Registration Section

FAX Aud. #: H24000099674
Letter Number: 724A00005646

HOLIDAI INC

3131 NE 1ST AVE
MIAMI, FL 33137
(201) 993-5373
dan.rees@holid.ai

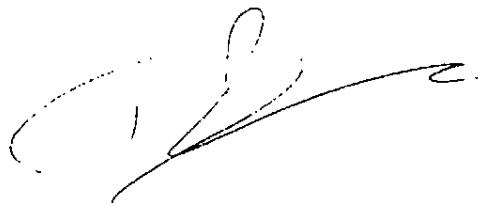
March 15th 2022

To whom it may concern,

Reference No. of Dissolved Filing: P24000011707

We are releasing the name Holidai Inc for use to the foreign business applying to conduct business in the state of Florida, and I can confirm that we have no intention of revoking the dissolution.

Sincerely,



Daniel Rees

CEO

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HolidAI Inc
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

The License Company LLC

Name of Person

The License Company LLC

Firm/Company

55 E Granada Blvd Unit 1415

Address

Ormond Beach, FL 32175

City/State and Zip code

info@thelicensecompany.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

The License Company LLC	at (844)	484-2466
Name of Person	Area Code	Daytime Telephone Number		

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

<input checked="" type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee &	<input type="checkbox"/> \$78.75 Filing Fee &	<input type="checkbox"/> \$87.50 Filing Fee,
	Certificate of Status	Certified Copy	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.*

1. HolidAI Inc

(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. DE 3. 35-2835918

(State or country under the law of which it is incorporated) (FEI number, if applicable)

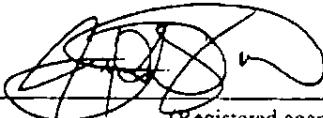
4. 01/10/2024 5.
(Date of incorporation) (Date of duration, if other than perpetual)6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)7. 3131 NE 1st Ave Apt 2707, Miami, Florida 33137(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Tiffany VillaOffice Address: 3131 NE 1st Ave, Apt 2707,Miami: , Florida 33137
(City) (Zip code)
 2024 MAR 18 PM 3:16
 DEPARTMENT OF STATE
 FLORIDA
 FILED

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.



(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: Daniel Rees
 Vice Chairman Address: _____
 Director _____ 62 Sheldon's Court, Winchcombe Street
 President _____ Cheltenham GL52 2NN, UK
 Vice President _____
 Secretary _____ Treasurer _____
 Other CEO Other _____

Chairman Name: Robbie Thompson
 Vice Chairman Address: 37 Colbourne Road.
 Director _____ Hove BN3 1TA, UK
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other CTO Other _____

Chairman Name: Matthew McGrigor
 Vice Chairman Address: 77 Hudson Street, 3811,
 Director _____ Jersey City, NJ 07302
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other MGR Other _____

Chairman Name: Tiffany Villa
 Vice Chairman Address: 3131 NE 1st Ave, Apt 2707,
 Director _____ Miami, Florida, 33137
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other MGR Other _____

Chairman Name: Daniel Goodwin
 Vice Chairman Address: 20 Norman Road,
 Director _____ Cardiff CF14 1PS, UK
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other MGR Other _____

Chairman Name: Joshua Rogers
 Vice Chairman Address: 3 Andrew Close,
 Director _____ Worcester WR26JQ, UK
 President _____
 Vice President _____
 Secretary _____ Treasurer _____
 Other MGR 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. _____

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. Daniel Rees, CEO

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

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOLIDAI 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 FOURTEENTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOLIDAI INC." WAS INCORPORATED ON THE TENTH DAY OF JANUARY, A.D. 2024.

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

2914015 8300

SR# 20241003395

You may verify this certificate online at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State

Authentication: 203022910

Date: 03-14-24