

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(20011000 21111), (101110)
(Document Number)
(Socialistic National)
Cartified Copies Cartificates of Status
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Special Instructions to Filing Officer:

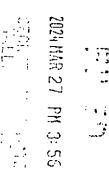




300426652053

08/27/24--01029--024 **650.90

03/27/24--01029--023 **70.00





COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Screening Distribution, Inc.			
Name of corporation	- must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for a "Certificate of Existence." or "Certificate of Good Standabove referenced foreign corporation to transact business	ding" and check are submitted to register the		
Please return all correspondence concerning this matter	to the following:		
Idalia Naranjo			
Name of I	Person		
Screening Distribution, Inc.			
Firm/Com	pany		
9350 Wilshire Blvd. Suite 410			
Addre	ess		
Beverly Hills, CA 90212			
City/State ar	nd Zip code		
idalia@screeningsdistribution.com			
E-mail address: (to be used f	or future annual report notification)		
For further information concerning this matter, please c	all:		
Idalia Naranjo at 6) 313-4064 Daytime Telephone Number		
Name of Person Area Code	e 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 \$70.00 Filing Fee \$\sum \text{ \$78.75 Filing Fee & Certificate of Status}\$	OF STATE S78.75 Filing Fee & S87.50 Filing Fee. 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.

"Inc" "Co" "C	orp," "Inc." "Co." or "Corp.")			
(If name unavaila	able in Florida, enter alternate corporate name ad	opted for the purpose of transact	ing business in Florida)	
California .	3.	82-2175215		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
09/01/2017				
(Date	of incorporation)	(Date of duration, if other than perpetual)		
03/31/23				
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502)		ility)	
9350 Wilshire Bl	vd. Suite 410. Beverly Hills, CA 90212			
	(Principal office	street address)		
	(Current mailing	address, if different)		
. Name and stree	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	7024 HAR 27	
Name:	Betty J. Hill			
ffice Address:	6515 15th St. Fast #H-06	_	27	
	Sarasota	Florida	7 PH 3:56	
	(City)	(Zip code)		
	ent's acceptance:		, C)	

(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	•						
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	9621 Cedarbrook Dr. Address:	□Vice Chairman	Address:				
□Director	Beverly Hills, CA 90210	□Director					
■President		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	☐ Secretary		□ Treasurer			
□Other	□Other	□Other		□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		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		□ 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.							
13. Manuel Corl	bi						



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

Entity Name: SCREENING DISTRIBUTION, INC.

Entity No.: 4029999

Registration Date: 05/25/2017

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 January 20, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 175022219

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.