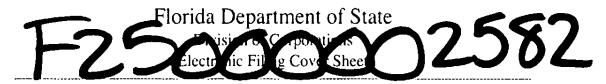
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE 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:			
CHIGT	AUUI ESS:			

## FOREIGN PROFIT/NONPROFIT CORPORATION MPN Software, Inc.

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

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APR 30 2025 K. Brumbley

## 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.

inder the law of which it is incorporate	rate name adopted for the purpose of transacting business  3	
inder the law of which it is incorporate		
•	orated) 3 (FEI number, if applicable)	
•	orated) (FEI number, if applicable)	
., .	5.	
incorporation)	5 5. (Date of duration, if other than perpet	tual)
er North, Suite 450, Atlanta, GA 3	0346	
(Curr	ent mailing address, if different)	
		207
<u>ddress</u> of Florida registered ag	ent: (P.O. Box NOT acceptable)	)5 P=
Corporate Creations Network Inc		- PA
801 US Highway I		30 7 1780 180 A
North Palm Beach	Florida 33408	ARRIONELL ARRIONELL ARRIVANIA FILED 2025 APR 30 AM 11: 0
(City)	(Zip code)	. 01
as registered agent and to acc		
ply with the provisions of all s	statutes relative to the proper and complete perform	
/s/ Kunning Chen	Kunning Chen, Special Secretary	
	(SEE SECTIONS 607.150) er North, Suite 450, Atlanta, GA 3  (Printed address of Florida registered age Corporate Creations Network Inc.  801 US Highway I  North Palm Beach  (City)  t's acceptance: I as registered agent and to acceptication, I hereby accept the aply with the provisions of all services.	North Palm Beach (City) (City) (Zip code)  T's acceptance:  I as registered agent and to accept service of process for the above stated corporate oplication, I hereby accept the appointment as registered agent and agree to act in apply with the provisions of all statutes relative to the proper and complete perform ith and accept the obligations of my position as registered agent.  /s/ Kunning Chen Kunning Chen, Special Secretary

under the law of which it is incorporated.

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

<sup>11.</sup> 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: Marjan Elbaum	□Chairman	Name: Darren Harris					
□Vice Chairman	Address:	□Vice Chairman	Address:					
Director	303 Perimeter Center North, Suite 450	Director	303 Perimeter Center North, Suite 450					
□President	Atlanta, GA 30346	President	Atlanta, GA 30346					
□Vice President		□Vice President						
<b>■</b> Secretary	□Treasurer	☐ Secretary	Treasurer					
Other	Other	■Other <u>CEO</u>	Other					
□ Chairman	Name: Benji Sucher	□Chairman	Name:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
□Director	303 Perimeter Center North, Suite 450	□Director	-					
□President	Atlanta, GA 30346	□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	NAME OF THE OWNER OWNER OF THE OWNER					
☐ 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.  12. /s/ Marjan Elbaum  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.



Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY "MPN SOFTWARE, 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 THIRTIETH DAY OF APRIL, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MPN SOFTWARE,

INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF APRIL, A.D.

2025.

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

Charuni Patibanda-Sanchez, Secretary of State
Authentication: 203571160

C. G. Sanchez

Date: 04-30-25