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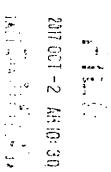
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	egistration Section vision of Corporation	ns ,				
SUBJECT:	Corellium, LLC					
SUBJECT	•	Name of L	imited Liability (Сотралу		
		reign Limited Liability Comp ed to register the above refere				
Please retur	n all correspondence of	concerning this matter to the	following:			
	Larry G. Brow	n				
	-	Na	me of Person			
	Corellium, LLC	C	· 			
	Firm/Company					
	9370 Madewoo	od Court	•			
	Address					
	Royal Palm Be	each, FL 33411	•			
		City/St	ate and Zip Code			
	lbrown.patents@	gmail.com				
		E-mail address: (to be used	for future annual	report no	tification)	
For further	information concernin	g this matter, please call:	1			
Larry G. Brown			561	632-90	20	
	Name o	of Contact Person	at (Area Code	Day	time Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	a check for the follow \$125.00 Filing Fee	ring amount: \$\sum \frac{1}{2} \frac{1}{3} \frac{0}{3} \text{0.00 Filing Fee & Certificate of Status}\$	\$155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Ce of Status & Certified Cop	



September 19, 2017

LARRY G BROWN 9370 MADEWOOD COURT ROYAL PALM BEACH, FL 33411

SUBJECT: CORELLIUM, LLC Ref. Number: W17000074932

We have received your document for CORELLIUM, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jenna D Harris Regulatory Specialist II

Letter Number: 617A00019036

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: L. Corellium, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Corellium 6, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "L.L.C.") 2 Delaware 3 82-2513845 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) No business transacted yet in Florida (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 16 E. Ocean Ave. 16 E. Ocean Avc. (Street Address of Principal Office) (Mailing Address) Ocean Ridge, FL 33435 Ocean Ridge, FL 33435 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Larry G. Brown Name: 9370 Madewood Court Office Address: Royal Palm Beach Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company 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) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Amanda Gorton Manager-Member 16 E. Ocean Ave Ocean Ridge, FL 33435 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any 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. Signature of an authorized person Larry G. Brown

Typed or printed name of signee

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CORELLIUM, LLC" IS DULY FORMED UNDER

THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CORELLIUM, LLC"

WAS FORMED ON THE SIXTEENTH DAY OF AUGUST, A.D. 2017.

Service of the servic

Authentication: 203300923

Date: 09-27-17