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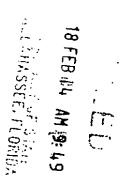
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(Address)					
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(City/State/Zip/Phone #)					
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TO: Registration Section Division of Corpora		•	
ZAG IP, LLC SUBJECT:			
	Name of	Limited Liability Co	прапу
The enclosed "Application by Existence, and check are subm	Foreign Limited Liability Comitted to register the above refer	pany for Authorization	on to Transact Business in Florida," Certificate I liability company to transact business in Flori
lease return all corresponden-	ce concerning this matter to the	following:	
Charles M. 7	Zeynel		
	N	lame of Person	
ZAG IP, LL	С		
	ŀ	irm/Company	·
16193 Edge	mont Drive		
		Address	
Fort Myers,	Florida 33908		
	City/S	State and Zip Code	
charles@zagi	nternational.com		
 .	E-mail address: (to be use	d for future annual re	port notification)
or further information concer	ning this matter, please call:		
Anna Chan		617 at ()	589-3834
Nan	e of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDREST Division of Corporati Registration Section P.O. Box 6327 Tallahassee, FL 3231	uns	E R C 2	TREET ADDRESS: Division of Corporations Registration Section Clifton Building 661 Executive Center Circle Callahassee, FL 32301
Enclosed is a check for the foll \$125.00 Filing Fee		S155.00 Filing Certified Copy	Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. ZAG IP, LLC (Name of Foreign I	Limited Liability Company; must include "Limite	Liability Company," "L.L.C.," or "ELC.")		
	ime adopted for the purpose of transacting business in Flo	ids. The alternate name must include "Limited Liability Com	pany," "L.E.C." or "LLC.")	
2. Delaware		3. (FEI number, if appl	urable)	
(Junisdiction under the law of wh	ich foreign limsted lubility company is organized)	tres manace, it appr	(Lable)	
4	(Date first transacted business in Florida, if prior to	registration.)		
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determine			
5. Charles M. Zeynel		6. Charles M. Zeynel (Mailing Address)		
(Street Address of Principal Office) 16193 Edgemont Drive		16193 Edgemont Drive		
Fort Myers, Florida 33908		Fort Myers, Florida 33908		
	······································			
7. Name and street addres	s of Florida registered agent; (P.O. Box	NOT acceptable)		
Name:	Charles M. Zeynel			
Office Address:	16193 Edgemont Drive			
	Fort Myers	, Florida <u>33908</u>		
	(Cuy)	(Zip code)		
8. The name, title or cap	(Registered agent) acity and address of the person(s) who h	nignaturi) as/have authority to manage is/are:	SSEE, FL	
Title or Capacity:	Name and Address:		me and Address:	
Manager	Charles M. Zeynel		<u>0</u> -4 7 0	
	16193 Edgemont Drive Fon Myers, Florida 33908			
				
		_		
(Use attachments if neces				
 Attached is a certificate jurisdiction under the law of the translator must be s 	of which it is organized. (If the certification	duly authenticated by the official having of the is in a foreign language, a translation of	ustody of records in the the certificate under outh	
10. This document is executed submitted in a document t	cuted in accordance with section 605.020 o the Department of State constitutes a f	(170), Florida Statutes. I am aware that aird degree felony as provided for in s.817.	any false information 155, F.S.	
	CHARLES H	e of an authorized period ZEVNEL		
	Typed	or printed name of a gnee		



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

DELAWARE, DO HEREBY CERTIFY "ZAG IP, 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 NINTH DAY OF FEBRUARY, A.D. 2018.

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

18 FEB LL AM E. 49

Authentication: 202125517

Date: 02-09-18

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