Division of Corporations

3/23/18, 13:C1 AM

Florida Department of State

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

Reflections International Inc.

Account Name : Corporate Creations International Inc.

Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

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

Email Address:

Email Address:

Foreign Limited Liability Company AumAlive, LLC

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Page Count	04
Estimated Charge	\$130.00

J. LEGGETT MAR 2 6 2018

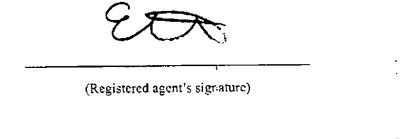
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 603.0902. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

- Name of Foreign Limited Liability Company: AumaLive, LLC
- 2. Jurisdiction under the law of which foreign limited liability company is organized: Delaware
- 3. FEI number, if applicable: Applied for
- 4. Date first transacted business in Florida, if prior to registration:
- 5. Street Address of Principal Office: 8649 AC Skinner Parkway, Jacksonville, Florida 32256
- 6. Mailing Address: 4700 Millenia Boulevard #175-90653, Orlando, Florida 32,839
- 7. Name and street address of Florida registered agent. Name: cRosidentAgent, Inc.
 Office Address: 236 E 6th Avc., Tallahassee, FL 32303

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.

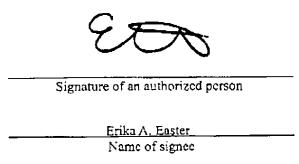


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8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are

Name and Address
Aumari Watkins
4700 Millenia Boulevard #175-90653
Orlando, Florida 32839
Title or Capacity: Manager

- 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.
- 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.



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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "AUMALIVE, 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-NINTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AUMALIVE, LLC"
WAS FORMED ON THE NINETEENTH DAY OF JANUARY, A.D. 2018.

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

....

6717259 8300 SR# 20180545939

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

Authentication: 202047201

Date: 01-29-18