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SECRETART OF STATE

ALLAHASSEE FROMING

AUG 0 6 2018 S. YOUNG

COVER LETTER

	tration Section of Corpo						
	<u>=</u> "	IFIED CORP					
SUBJECT:			corporation -	must include suffix		<u> </u>	
Dear Sir or M	ladam:						
"Certificate o	f Existence,		f Good Stand	authorization to Transac ing" and check are sub s in Florida.			
Please return	ali correspo	ndence concerning	g this matter t	to the following:			
MARSHA S	SIHA						
			Name of P	erson			
INCFILE.C	OM LLC						
			Firm/Comp	any			
134 VINTA	GE PARK	BLVD A-50					
	•		Addres	SS		-	
HOUSTON	1 TX 7707	0					
			City/State an	d Zip code		ALLA ALLA	=
		E-mail address:	(to be used fo	or future annual report r	notification)	Sold Control	= T
For further in	formation c	oncerning this mat	tter, please ca	ill:		SEE, FL	
MARSHA S	SIHA	20	888	、462-3453 X 701			
Nam	e of Person	a	Area Code	Daytime Telepl	hone Number	DA C	
Regis Divis Clifto 2661	stration Sect sion of Corp on Building	orations Center Circle		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations		
Enclosed is a	check for th	e following amou	nt:				
\$70.00 Fil	ling Fee	S78.75 Filing 1 Certificate of		\$78.75 Filing Fee & Certified Copy	\$87.50 Fi Certifica Certified	te of Status	&

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.

	f corporation; must include "INCORPORATED," "C" "Corp," "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION,"	
•	ailable in Florida, enter alternate corporate name adop	oted for the purpose of transacting l	business in Florida)
_{2.} Delaware			
(State or cour	ntry under the law of which it is incorporated)	(FEI number, if appli	icable)
4. Jul 20, 20	3,		
(D:	ate of incorporation)	(Date of duration, if other the	an perpetual)
6. UPON RE	GISTRATION		
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,)
		1.5., to determine penalty habitity	,
7BEast	7th Ave Suite 233		,
/· <u></u> _	7th Ave Suite 233 (Principal o	ffice address)	<u> </u>
7	7th Ave Suite 233 (Principal o	ffice address)	
/· <u></u>	7th Ave Suite 233 (Principal o	ffice address)	
Tampa, FL	7th Ave Suite 233 (Principal o	ffice address) ddress, if different)	18 JUL SLOR 13 TALLAHA
Tampa, FL 8. Name and str	(Principal of 33605 (Current mailing active address of Florida registered agent: (P.O. Bartella Corporate Services Inc.	ffice address) ddress, if different)	18 JUL 30 SLIGHT (AUT S TALLAHASSEE
Tampa, FL 8. Name and str Name:	(Principal of 33605 (Current mailing active address of Florida registered agent: (P.O. Bartella Corporate Services Inc.	ffice address) ddress, if different)	18 JUL 30 SLOW (ACT TALLAHASSI

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Patty Linest
(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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ROBERT NIKIC Address: 1228 East 7th Ave Suite 233 Tampa, FL 33605 Vice Chairman: Address: ROBERT NIKIC Address: 1228 East 7th Ave Suite 233 Tampa, FL 33605 **B. OFFICERS** President: ROBERT NIKIC Address: 1228 East 7th Ave Suite 233 Tampa, FL 33605 Vice President: Address: _ Secretary: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. ROBERT NIKIC - President (Typed or printed name and capacity of person signing application)

Page 1



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

DELAWARE, DO HEREBY CERTIFY "WHY UNIFIED CORP" 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 TWENTY-THIRD DAY OF JULY, A.D. 2018.

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

18 JUL 30 PM 6: 37



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Authentication: 203112023

Date: 07-23-18