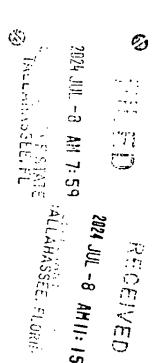
M24000008607

(Re	equestor's Name)			
(Ác	ddress)			
- (Δ	ddress)			
(~	,uiess)			
(Ci	ty/State/Zip/Phone #)			
_	_	_		
PICK-UP	☐ WAIT	MAIL		
(R)	usiness Entity Name)			
(30	isiness Emily (varie)			
(Do	ocument Number)			
Certified Copies	_ Certificates of	Status		
		-		
Special Instructions to Filing Officer:				
		•		





400431048314





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 505484

AUTHORIZATION :

COST LIMIT : \$ 70.00

30527 Juli Ble Bally

ORDER DATE: June 19, 2024

ORDER TIME : 10:22 AM

ORDER NO. : 505484-050

CUSTOMER NO: 8183052

FOREIGN FILINGS

NAME: THE FEMININA GROUP, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER:

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.

Defaware		17 4090740	cting business in Florida)	
Delaware 3. (State or country under the law of which it is incorporated)		(FEI number, if applicable)		
	-		applicable)	
08/31/2015	5.	Perpetual		
	of incorporation)	(Date of duration, if other than perpetual)		
Upon Filing	·			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty lia	bility)	
010 W. Boy Sc	out Blvd. Suite 500 Tampa, FL 33607			
·	(Principal off	ce street address)		
		— —		
	(Current mailir	11 '0 1'00 '0		
		g address, if different)		
	(Suren man)	g address, if different)	<i>(2</i> 3)	
Name and stree			707 307	
	et address of Florida registered agent: (P.C		2024 JI آلمان هالالالالالالالالالالالالالالالالالالال	
Name and <u>stre</u>			2024 JUL -	
Name:	et address of Florida registered agent: (P.C		2024 JUL −8 (ALL/AAS	
Name:	et address of Florida registered agent: (P.C Corporation Service Company). Box <u>NOT</u> acceptable)		
Name:	Corporation Service Company 1201 Hays Street Tallahassee	D. Box <u>NOT</u> acceptable) Florida 32301	1 20	
	et address of Florida registered agent: (P.C. Corporation Service Company 1201 Hays Street). Box <u>NOT</u> acceptable)	1 20	
Name: ice Address: Registered ag	ct address of Florida registered agent: (P.C. Corporation Service Company 1201 Hays Street Tallahassee (City)	O. Box NOT acceptable) . Florida 32301 (Zip code)	-8 AH 7: 59 KHASSEE, FL	
Name: ice Address: Registered ag	Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: eed as registered agent and to accept servi	O. Box NOT acceptable) . Florida 32301 (Zip code) ce of process for the above sta	-8 AH 7: 59 AND SEEL FL STATE ted corporation at the p	
Name: ice Address: Registered againg been nanignated in this	ct address of Florida registered agent: (P.C. Corporation Service Company 1201 Hays Street Tallahassee (City)	D. Box NOT acceptable)	ted corporation at the page to act in this capac	

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.

A. DIRECTORS						
□Chairman	Jill Angelo Name:	□Chairman	Name: Brian Wright			
□Vice Chairman	Address: 4010 W. Boy Scout Blvd.	□Vice Chairman	Address:			
□Director	Suite 500	□Director	Suite 500			
■ President	Tampa, FL 33607	□President	Tampa. FL 33607			
□Vice President		■ Vice President				
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	Other	Other				
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President	10.10.0			
□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				
☐ 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. 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. Brian Wright



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

DELAWARE, DO HEREBY CERTIFY "THE FEMININA GROUP, 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 FIFTH DAY OF JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE FEMININA GROUP, INC." WAS INCORPORATED ON THE THIRTY-FIRST DAY OF AUGUST, A.D. 2015.

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

e at coro delaware gov/aut

Authentication: 203865975

Date: 07-05-24