Division of Corporations
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Division of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION S2BN HOLDINGS INC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

(If name unavail:	able în Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
Delaware	3.	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
, <u>December</u>	· · · · · · · · · · · · · · · · · · ·	Perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
s. <u>Upon filing</u>	of this application with the F	lorida Secretary of State.
		n Florida, if prior to registration) 602, F.S., to determine penalty liability)
4000 145	·	4000 MANA DEAGUEL 00400
7. 1088 MEI	CPrincipal office add	1000 MIAMI BEACH FL 33139
4000 ME	` •	Total Control of the
1000 ME	Current mailing add	1000 MIAMI BEACH FL 33139 8
	(Current maning and	[188] 至
. Anv and	all business permitted un	
) of corporation authorized in home state or ec	<u> </u>
•	-	**************************************
y. Name and <u>sired</u>	et address of Florida registered agent: (P.C	o. Hox NOT acceptable)
Name:	NRAI Services, Inc	
Office Address:	Suite 4 2731 Executive Park Dr	ive .
	Weston	Florida 33331
	(City)	(Zip code)

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.

All Holden, Asst. Secretary

^{11.} 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.

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12. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman:	- · - · · · · · · · · · · · · · · · · ·	
Address:		
Vice Chairman:		
Address:		
Director: JONATHAN LINDEN		
Address: 1688 MERIDIAN AVENUE, SUITE 1000 MIAMI BEACH	FL 331	<u>139</u>
Director:		
Address:		
B. OFFICERS President: Jonathan Linden Address: 1688 MERIDIAN AVENUE, SUITE 1000 MIAMI BEACH FL 33139 Vice President: Address:	SECRETARY OF STAT	TO DEC BO AM IO:
Secretary: Jonathan Linden		-5
Address: 1688 MERIDIAN AVENUE, SUITE 1000 MIAMI BEACH FL 3313	9	
Treasurer: Mitchell Cohen		,
Address: 1688 MERIDIAN AVENUE, SUITE 1000 MIAMI BEACH FL 3313	39	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or di		
	10013.	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the fact are true and that he or she is aware that false information submitted in a document to the Department of S third degree felony as provided for in s.817.155, F.S.	s stated her	'ein tutes a
14. Mitchell Cohen - Treasurer		
(Typed or primed name and capacity of person signing application)		

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Delaware

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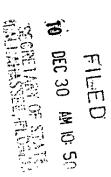
The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "S2BN HOLDINGS 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 THIRTIETH DAY OF DECEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "S2BN HOLDINGS INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF DECEMBER,

A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



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Jeffrey W. Bullock, Secretary of State

AUTHENT'S CATION: 8460367

DATE: 12-30-10

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