

11/16/2020

Division of Corporations

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

Email Address: _____

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FOREIGN PROFIT/NONPROFIT CORPORATION

GotPhoto, Inc.

Certificate of Status	0
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11/18/20

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.

1. GotPhoto, Inc.
 (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 38-4126528
 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 8/10/2019 5. _____
 (Date of incorporation) (Date of duration, if other than perpetual)

6. _____
 (Date first transacted business in Florida, if prior to registration)
 (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 433 Broadway, New York, NY 10013
 (Principal office address)

_____ (Current mailing address, if different)

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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
 (City) (Zip code)

9. Registered agent's acceptance:

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.

C T Corporation System
 By: Candice Pignataro
 (Registered agent's signature)

Candice Pignataro,
Asst. Secretary

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: Benedikt Peter Egon Wolfgang Greifenhofer ✓
c/o GotPhoto, Inc.
Address: 433 Broadway, New York, NY 10013

Vice Chairman: Markus Posselt ✓
c/o GotPhoto, Inc.
Address: 433 Broadway, New York, NY 10013

Director: Joachim Bemecker ✓
c/o GotPhoto, Inc.
Address: 433 Broadway, New York, NY 10013

Director: _____
Address: _____

B. OFFICERS

President: Benedikt Peter Egon Wolfgang Greifenhofer ✓
c/o GotPhoto, Inc.
Address: 433 Broadway, New York, NY 10013

Vice President: _____
Address: _____

Secretary: Benedikt Peter Egon Wolfgang Greifenhofer ✓
c/o GotPhoto, Inc.; 433 Broadway, New York, NY 10013

Treasurer: Benedikt Peter Egon Wolfgang Greifenhofer ✓
c/o GotPhoto, Inc.; 433 Broadway, New York, NY 10013

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. B. Greifenhofer
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. Benedikt Peter Egon Wolfgang Greifenhofer
(Typed or printed name and capacity of person signing application)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GOTPHOTO, 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 TWELFTH DAY OF NOVEMBER, A.D. 2020.

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

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

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Jeffrey W. Bullock, Secretary of State



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

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

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