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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HScent Transportation Services, Inc. Name of corporation - must include suffix
Name of corporation - must include surfix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Julia Laverde Name of Person
Name of Person
Ascent Transportation Services
Firm/Company
Ascent Trans partation Services Firm/Company 8388 South Tamiani Trail #68 Address
Salasata Fl. 34238
City/State and Zin code
Sarasota FL 34238 City/State and Zip code Julie @ ascenttransportation, Lom E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Julia Laverde 1,503, 970-5025
Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section MAILING ADDRESS: Registration Section
Division of Corporations Division of Corporations
The Centre of Tallahassee P.O. Box 6327
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\Begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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. ASCENT: Transparlation; Services Inc., (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Corp." "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")
ASCENT Transportation (simmercial Truck Services, Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. <u>Ortgon</u> (State or country under the law of which it is incorporated) 3. <u>45-4658/34</u> (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. D2-28-12 (Date of incorporation) 5. Description (Date of duration, if other than perpetual)
(Date of incorporation) (Date of duration, if other than perpetual)
6. Van. 1, 2022
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
1. 143 Vista Hermosa Grele, Sarasota FL 34242
(Principal office street address)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 143 Vista Hermosa Grole, Sarasota FL 34242 (Principal office street address) (Principal office street address) (Current mailing address, if different)
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: William Laverde
11/2 Viela 1/2 2000 / 11
Swasuta . Florida 34242 (City) (Zip code)
(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.

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			1 , , ,		
Sachairman	Name: William Laverde	Chairman	Name: Julia Laverde		
✓ □Vice Chairman	Address: <u>B388 S. Tamiami Trail</u>	□Vice Chairman			
□Director	#68	□Director	±1: 68		
□President	Sarasota FL 34238	□President	Sarasota FZ 34238		
□Vice President		□Vice President			
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		
□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. Mica awarde Signature of Director or Officer					
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. (Typed or printed name and capacity of person signing application)					

State of Oregon

OFFICE OF THE SECRETARY OF STATE

Corporation Division

Certificate of Existence 168W132Y1

I, SHEMIA FAGAN, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

ASCENT TRANSPORTATION SERVICES, INC.

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

SHEMIA FAGAN, SECRETARY OF STATE

1/25/2022