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(Requ	uestor's Name)			
(Address)				
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(City/	State/Zip/Phone	÷#)		
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FLORIDA CAPITAL COURIER SERVICES, INC	;
2330 CLARE DRIVE .	•
TALLAHASSEE, FL 32309	> ,
(850) 524–5437	
(850) 524–6243	
Please use funds from this account:	20210000160: \$ 78.75
Authorization Signature:	fulle :
DO & CO Events USA, Inc.	
BUSINESS NAME DOCL	JMENT #
Certified Copy of Articles of Organization	on
X Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Corp Not for Profit Limited Liability Domestication Other CORP LLLP	AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentRevocation of DissolutionMergerConversionAmended and restated ArticlesStatement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	_X_ Foreign filing Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other
Country	
EXAMINER'S INITIALS:	

FLORIDA CAPITAL COURIER SERVIC	CES, INC
2330 CLARE DRIVE	
TALLAHASSEE, FL 32309	
(850) 524–5437	
(850) 524–6243	
Please use funds from this acco	ount: I20210000160: \$ 78.75
Authorization Signature:	Jan Fell:
DO & CO Events USA, Inc.	J
BUSINESS NAME	DOCUMENT #
Certified Copy of Articles of Org	ganization
X Certificate of Status	
<u>NEW FILINGS</u>	<u>AMMENDMENTS</u>
Profit Corp Not for Profit Limited Liability Domestication Other LLLP	AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentRevocation of DissolutionMergerConversionAmended and restated ArticlesStatement of Authority
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	_X_ Foreign filing Limited Partnership
Fictitious Name	Reinstatement
APOSTILLE	Other
Country	
EVAMINED'S INITIALS:	

COVER LETTER

		ration Section on of Corpora	ions					
SUBJE	CT:	DO & CO Eve	nts USA, Inc.					
CODOE	~ .	Name of corporation - must include suffix						
Dear Sir	or Ma	dam:						
"Certific	ate of	Existence," or	y Foreign Corpore "Certificate of G poration to transa	ood Stan	ding" a	nd check are sub		
Please re	turn al	l corresponde	nce concerning th	is matter	to the	following:		
Alexande	г Карр	ner						
			1	Name of	Person			
DO & CO) Even	s USA, Inc.						
			F	irm/Com	pany			
149-32 13	32nd S	treet						
				Addre	SS	-		
Jamaica,	New Y	ork 11430						
			Cit	y/State ar	nd Zip	code		
alexander	.kappn	er@doco.com						
		E	mail address: (to	be used f	or futu	e annual report i	notification)	
For furth	er info	rmation conc	erning this matter	, please c	all:			
Alexande		ner	et (310	, 800	-7121		
İ	Name	of Person	at (³	Area Code	_/. •	Daytime Telep	hone Number	
ה ב ד 2	Registr Division The Ce 2415 N	ation Section n of Corpora ntre of Tallah	assec et, Suite 810			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	
	ke che	k payable to:	ollowing amount: FLORIDA DEPAI \$78.75 Filing Feat Certificate of Sta	RIMENT & [\$78.7	ATE 5 Filing Fee & fied Copy		Filing Fee, cate of Status & cd Copy

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. DO & CO Events USA, Inc.

		orporation; must include "INCORPORA" orp," "Inc," "Co," or "Corp.")	TED," "COMPANY,"	"CORPORATION,"			
	(If manne unavaila	ble in Florida, enter alternate corporato n	same adopted for the pr	urpose of transacting business in Florida)		
2.	Nevada, United	Nevada, United States 88		-2340811			
	(State or country	under the law of which it is incorporate	d)	(FEI number, if applicable)			
4	05/09/2022		5		_		
٧.	(Date	of incorporation)	(Date o	f duration, if other than perpetual)			
6. 7.	49-32 132nd Stre	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 ct, Jamaica, New York, 11430 (Principa		mine penalty liability)	-	·	
-		(Current n	nailing address, if diffi	erent)	, c.	, 70,	
8. 1	Name and street	address of Florida registered agent:	(P.O. Box NOT ac	ceptable)	= -	APR دعاناً	T
	Name:	Steffen Brandt			ŽE:		ال ال عامد : عامد :
Off	ice Address:	3401 NW 72nd Avenue			<i>></i>	9 -	; ;
		Miami	Florida	33122		<u> </u>	£ 2 2 2 2 2 3 2 4 3 2 4 3 4 4 4 4 4 4 4 4
		(City)	, , , , , , , , , , , , , , , , ,	(Zip code)	. 1.	بو	Server 1

9. Registered agent's acceptance:

llaving 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						
□Chairman	Name:	☐ Chairman	Name:			
☐ Vice Chairman	Address: 4000 Redondo Beach Ave.,	□Vice Chairman	Address: 149-32 132nd Street,			
Director	Suite 101, Redondo Beach, CA 90278	Director	Jamaica, NY 11430			
□President		President				
☐ Vice President		□Vice President				
⊠ Secretary	□ Treasurer	□ Secretary	☐ Treasurer			
Other	Other	□Other				
□Chairman	Johannes Kroner	□ Chairman	Tino Wohlfahrt			
□Vice Chairman	149-32 132nd Street, Address:	□Vice Chairman	Address: 149-32 132nd Street,			
₽ Director	Jamaica, NY 11430	□Director	Jamaica, NY 11430			
□President		□President	· -			
□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				
☐ Secretary	□Treasurer	☐ Secretary	□ Treasurer			
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.						
-			•			
·-· — — —	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. Alexander K	appner, Secretary					
(Typed or printed name and capacity of person signing application)						

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DO & CO Events USA, Inc.**, as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 05/09/2022, and is in good standing in this state.



Certificate Number: B202303203481265

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 03/20/2023.

-VAquelan

FRANCISCO V. AGUILAR Secretary of State