# F2400001222

(Requestor's Name)						
(Address)						
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### **COVER LETTER**

	O: Registration Section Division of Corporations				
SUBJE	OT: BMR INDUSTRY INC				
SOBSE		f corporation - mu	ist include suffix		
Dear Sir	or Madam:				
"Certifica	osed "Application by Foreign Corate of Existence." or "Certificate of Ferenced foreign corporation to tra	of Good Standing	and check are subm		
Please re	turn all correspondence concernir	ng this matter to th	e following:		
BMR INI	DUSTRY INC				
-		Name of Perso	on		
BMR IN	DUSTRY INC				
		Firm/Company	,		
990 Bisca	iyne Blvd, Office 701				
		Address	•		
Miami, F	L 33132				
	faucher of 100 E-mail address: er information concerning this ma		p code L · Com ture annual report no	otification)	
Benjamin	Name of Person at (305 Area Code Daytime Telephone Number				
1	Name of Person	Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Se Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Please ma	is a check for the following amounts to the check payable to: FLORIDA DE 0 Filing Fee	PARTMENT OF : ; Fee &   \$78	STATE 3.75 Filing Fee & rtified Copy	□ \$87.50 Filing Fee. Certificate of Status & Certified 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.

BMR INDUST	BMR INDUSTRY INC						
(Enter name of o	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION	","				
46		<del></del>					
	name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
2. Delaware	3. ry under the law of which it is incorporated)	32-0743295	-0743295				
00/00/2022							
(Date	e of incorporation)	(Date of duration, if other than perpetual)					
6. 02/13/2024							
990 Biscavne Bl	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 avd, Office 701, Miami FL 33132	Florida, if prior to registration) 02, F.S., to determine penalty liab	dity)				
7		e <u>street</u> address)	<del></del>				
	(Timespat office	e <u>street</u> dodress)					
	(Current mailing	g address, if different)	_				
	(Cultin mann)	s address: if different)					
8 Name and stree	et address of Florida registered agent: (P.O	Box NOT accomtable)	<b>20</b>				
	Fiducial Jade Inc	. Box <u>(NOT</u> acceptable)	2024 FEB 19 SECRETARY				
Name:	000 D: 49 LOSS - 501	<del></del>					
Office Address:	990 Biscayne Blvd Office 701		5 G				
	Miami	Florida	FEB 19 PH 3: 5 ALLIANS SESTER				
	(City)	(Zip code)	PM 3: 50				
9 Registered ag	ent's acceptance:		SO STE				
	ent's acceptance. ned as registered agent and to accept servic	e of process for the above stat	ed corporation at the place				
designated in this	application, I hereby accept the appointm	ent as registered agent and ag	ree to act in this capacity.				
further agree to c	omply with the provisions of all statutes re	lative to the proper and compl	lete performance of my duti				
ana 1 am jamiliai	r with and accept the obligations of my pos	ition as registered agent.					
	1						
	Terle						
_	The animal and a service of the serv						
	(Registered agent's sig	gnature)					

under the law of which it is incorporated.

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

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

#### A. DIRECTORS MOUSSION Benjamin □ Chairman Name: □ Chairman Name: \_\_\_\_\_ 990 Biscayne Blvd, Office 701 Address: □ Vice Chairman ☐ Vice Chairman Address: \_\_\_\_\_ Miami, FL 33132 □ Director Director ■ President □President □ Vice President □ Vice President □ Secretary ☐ Treasurer □ Secretary ☐ Treasurer □Other \_\_\_\_\_ ☐ Other \_\_\_\_\_ □Other \_\_\_\_ □Other □ Chairman Name: \_\_\_\_\_ □Chairman □ 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 \_\_\_\_\_ 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. Benjamin Moussion Karanyo 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. Benjamin Moussion 13.

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# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BMR INDUSTRY 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 FOURTH DAY OF FEBRUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BMR INDUSTRY INC." WAS INCORPORATED ON THE EIGHTH DAY OF AUGUST, A.D. 2023.



Jeffrey W. Bullock, Secretary of State

Authentication: 202734058