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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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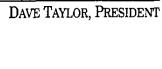
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DIVISION OF CURTALITIONS
TALLATASSEE FLORIDA

07 MAR 19 PH 3: 46

07 MAR 19 AM 10: 30 SECRETARY OF STATE

FLORIDA ©OMPLIANCE SPECIALISTS, INC.



2331 Hanson Place Tallahassee, Florida 32301 Voice: (850) 942-5464 Fax: (850) 942-5111 www.floridacompliance.com

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

	ı	
1. NE	(Corporation Name) SERVICES INC	
2	(Corporation Name) (Document #)	
3.		
J	(Corporation Name) (Document #)	
4	(Corporation Name) (Document #)	
☐ Walk in	Pick up time 3/20	
☐ Mail out	Will wait Photocopy Certificate of Status	
NEW FILINGS:	AMENDMENTS.	
 Profit	Amendment	
NonProfit	Resignation of R.A., Officer/ Director	
Limited Liability	Change of Registered Agent	
 Domestication	Dissolution/Withdrawal	
 Other	Merger	
OTHER FILIN		
 Annual Report	QUALIFICATION	
 Fictitious Name	Foreign Limited Postson Min	
Name Reservation	Limited Partnership	

Reinstatement

Trademark

Other

LAMINICI S Indais	Examiner's Initials	
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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.

NEXUS CAPITAL SERVICES 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)	
. NEW YORK 3. 35-2287655	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
5. PERPEUM. (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
(Date first transacted business in Florida, if prior to registration)	
(Dath first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
. 3275 VETERANS MEMBERS AWY. SUITE B-12 RONKONKOMA W/11779	
(Principal office address)	
(Current mailing address)	
(Current mailing address)	
MORTHAUS BROKERING SUD S	ŀ
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	25
P. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: Florida Compliance Specialis To INC PSE Secretario De Secretario D	
Office Address: 233/ HANSEN Place	
TAlahassee , Florida 3230/ (City) (Zip code)	h-mare
O. Berintana I and Alamana	

10. 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.

(Registered agent's signature)

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.

12. Names and business addresses of officers and/or directors:	7 SS 07 +
A. DIRECTORS	AECAE THAN TH
Chairman:	HASS
Address:	田公司
	D: 3 LONG
Vice Chairman:	Pr.
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
T	
President: JIMMY NOGS Address: 3075 VETERAS HEADRING HUY. SUITE B-	
Table we see all summer	
Vice President:	
Address:	
Audress	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers	s and/or directors.
13.	
(Signature of Director or Officer listed in number 12 of the application)	
14. TIMY ROTES PRESIDENT (Typed or printed name and capacity of person signing application)	·
(Typed of printed name and capacity of person signing application)	

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of NEXUS CAPITAL SERVICES INC. was filed on 01/11/2007, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 22nd day of January two thousand and seven.

Special Deputy Secretary of State

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SECRETARY OF STATE