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COVER LETTER

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SORTEC	CT: Hycl	Name	e of corporati	on - must	include suffix	
	or Madam:					
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Please ret	turn all corresp Nalic P	chet	rning this ma	ter to the	following:	
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1	Name of Persor	1	Area C	ode	Daytime Teleph	none Number
R D C 2	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Fallahassee, FL	tion porations Center Circle	ess:		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection rporations
Enclosed	l is a check for	the following a	mount:			
□ \$70.0	0 Filing Fee	□ \$78.75 Fil Certificat	ing Fee & e of Status		75 Filing Fee & fied Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
HVaro Renk 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. 65-1297305
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. Uanumy 25 300' 5. (Date of duration, if other than perpetual)
6. September 01st 2015
(Date first transacted business in Florida, if prior to registration)
7 513 GULGETIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 513 GUYStungean La ST Cloud 34772 (Principal office address)
P.O. Box 625 Simer Wi 53086
(Current mailing address, if different)
As T
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: OTTY Valpp.
Office Address: 0101 001+5T01(4001) 200
St Cloud, Florida 34772
(City), Florida 3/1/0 (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.
and a registered agent.
American de la companya della companya della companya de la companya de la companya della compan
Registered agent's signature)
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: _ Vice Chairman: Director: **B. OFFICERS** Vice President: If necessary you may attach an addendum to the application listing additional officers and/or directors. 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. Vincent Deavoy

(Typed or printed name and capacity of person signing application)

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "HYDRO RENTS 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 THIRTEENTH DAY OF OCTOBER, A.D.

2015.

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.

15 OCT 28 AM 3: 11
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

at corp delaware gov/authver sht

Authentication: 10229852

Date: 10-13-15

4283606 8300 SR# 20150487949

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