

**F16000001826**

Florida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 617-6383

## From:

Account Name : SPIEGEL & UTRERA, P.A.  
Account Number : FCA0000000001  
Phone : (305) 854-6000  
Fax Number : (305) 860-2076

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION  
ASCON RESOURCE MANAGEMENT CORP.**

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EXAMINER

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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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

1. ASCON RESOURCE MANAGEMENT CORP.  
(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. APPLIED FOR  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 4/11/2016 5. UPON FILING  
(Date of incorporation) (Date of duration, if other than perpetual)
6. UPON FILING  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 80 PINE STREET, 24TH FLOOR, NEW YORK, NEW YORK 10005  
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: SPIEGEL & UTRERA, P.A.  
Office Address: 1840 SW 22ND STREET, 4TH FLOOR  
MIAMI, Florida 33145  
(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.

SPIEGEL & UTRERA, P.A.

By Natalia Utrera, NATALIA UTRERA, Vice-President  
(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.

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11. Name and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: SASCHA SCHUH

Address: 80 PINE STREET, 24TH FLOOR

NEW YORK, NEW YORK 10005

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: SASCHA SCHUH

Address: 80 PINE STREET, 24TH FLOOR

NEW YORK, NEW YORK 10005

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: SASCHA SCHUH

Address: 80 PINE STREET, 24TH FLOOR, NEW YORK, NEW YORK 10005

Treasurer: SASCHA SCHUH

Address: 80 PINE STREET, 24TH FLOOR, NEW YORK, NEW YORK 10005

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

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. SASCHA SCHUH, PRESIDENT

H16000097556 3 (Typed or printed name and capacity of person signing application)

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# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "ASCON RESOURCE MANAGEMENT CORP." 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 ON THE FOURTEENTH DAY OF APRIL,  
A.D. 2016.

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You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Handwritten signature of Jeffrey W. Bullock, Secretary of State.  
Jeffrey W. Bullock, Secretary of State

Authentication: 202151586

Date: 04-14-16