## FECCOCOS 191

(Re	questor's Name)			
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## **COVER LETTER**

	Registration Section Section   Division of Corporate				
SUBJE	Quatro Man	agement Inc.			
SUBJE	C1	Name of corp	ooration - m	ust include suffix	
Dear Sir	or Madam:				
"Certific	ate of Existence,		ood Standing	norization to Transact 3" and check are subm 1 Florida.	
Please re	turn all correspo	ndence concerning thi	s matter to t	he following:	?
Gabriela	E. Palmieri				:
	•	N	ame of Pers	on	
Quatro M	lanagement Inc.				1
		Fi	rm/Compan	y	•
60 E 42n	d Street, Suite 311	)			
			Address		
New Yor	k, New York 1016	5			
		_	/State and Z	ip code	
gabriela.p	palmieri@quatrom				
		E-mail address: (to b	e used for f	uture annual report no	tification)
For furth	er information co	oncerning this matter,	please call:		
Gabriela	E. Palmieri	at (	201	232-9893	
	Name of Person		rea Code	Daytime Telepho	one Number
I ( 2	STREET/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Fallahassee, FL	orations Center Circle		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Enclosed	f is a check for th	e following amount:			
□ \$70.0	00 Filing Fee	☐ \$78.75 Filing Fee Certificate of Stat		8.75 Filing Fee & ertified Copy	S87.50 Filing Fee, Certificate of Status &

## 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

Quatro Managen	nent luc.  orporation; must include "INCORPORATEI		WYYN MANTY " WOODBOD ATION "
	orp." "Inc.," "Co." or "Corp.")	J.	COMPANT, CORPORATION
Quatro Managen	nent Florida, Inc.		
(If name unavaila	ble in Florida, enter alternate corporate name	3C 8	dopted for the purpose of transacting business in Florida)
Delaware		3.	27-5403849
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
November 12, 20	D10 	<b>5</b> .	N/A
(Date	of incorporation)		(Date of duration, if other than perpetual)
N/A 6.			
60 E 42nd Street.			Florida, if prior to registration)  102, F.S., to determine penalty liability)
<u>.</u>	(Prin	сір	a) office address)
	(Current ma	ilin	g address, if differents
8. Name and stree	u address of Florida registered agent: (I	P.C	). Box NOT acceptable)
Name:	Corporation Service Company		
Office Address:	1207 Hays Street		
	Tallabassee		. Florida
	(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.

(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. DIRI	ECTORS		
Chairman	Bhanu Choudhrie		
Address:	c/o C&C Alpha Group, 23 Buckingham Gate, London SW1E 6LB, United Kingdom		
Address.			
Vice Chei	Dhairya Choudhrie		
	c/o C&C Alpha Group, 23 Buckingham Gate, London SW1E 6LB, United Kingdom		
Address:	· · · · · · · · · · · · · · · · · · ·		
Director:			
Address:		<del>.</del>	
Director:		-	
Address:		:	
B. OFF	ICERS		
President:	Bhanu Choudhrie	•	
	c/o C&C Alpha Group, 23 Buckingham Gate, London SWIE 6LB, United Kingdom		
Address:			
	Dhairya Choudhrie		
Vice Presi	c/o C&C Alpha Group, 23 Buckingham Gate, London SWIE 6LB, United Kingdom		
Address:			
	Gabriela E. Palmieri		
Secretary:			
Address:	60 E 42nd Street, Suite 3110, New York, New York 10165		
Treasurer:	John Stanfield	_	
Address:	594 Hickory Road, Illinois 60137		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or dire	ectors.	
are true a a third de	Signature of Director or Officer ser or director signing this document (and who is listed in number 11 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of Stagree felony as provided for in s.817.155, F.S.	ate constitute	es
13	rabicle E. Polmieri - General Consel 9 50	unctus.	7

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



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

DELAWARE, DO HEREBY CERTIFY "QUATRO MANAGEMENT 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 TWENTY-SIXTH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QUATRO

MANAGEMENT INC." WAS INCORPORATED ON THE TWELFTH DAY OF NOVEMBER,

A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2-7

Authentication: 202961445

Date: 06-26-18