F1800003454

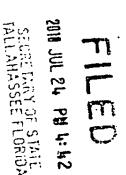
| (Re | equestor's Name) | | | | | | |
|---|--------------------|------|--|--|--|--|--|
| · | | | | | | | |
| (Ac | ldress) | | | | | | |
| Ų | , | | | | | | |
| | 1.4 | | | | | | |
| (AC | ldress) | | | | | | |
| | | | | | | | |
| (Ci | ty/State/Zip/Phone | e #) | | | | | |
| PICK-UP | ☐ WAIT | MAIL | | | | | |
| | | | | | | | |
| (Bi | usiness Entity Nan | ne) | | | | | |
| | | | | | | | |
| (Do | ocument Number) | | | | | | |
| | | | | | | | |
| Certified Copies Certificates of Status | | | | | | | |
| | | | | | | | |
| <u> </u> | | | | | | | |
| Special Instructions to Filing Officer: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | · | ! | | | | | |
| | | | | | | | |
| | | | | | | | |
| I | | | | | | | |

Office Use Only



100316125741

07/24/18--01002--013 **78.75



n RRUCE JUL 28 2018

COVER LETTER

: 4

| то: | Divisi | ration Secon of Cor | | | | | | | |
|---|----------------------|------------------------|---------------------------|----------------------------|---|--|---------------|--|---------------------|
| SUBJ | | | | na of corporat | | must include suffix | | | |
| | | | Nai. | ne or corporat | 1011 - 1 | must metude surfix | | | |
| Dear S | ir or Ma | idam: | | | | | | | |
| "Certit | icate of | Existenc | | ate of Good S | tandi | nthorization to Transa ng" and check are sub in Florida. | | | |
| Please HECTC | return a DR S. WO | ll corresp DNG ALMA | ondence conce GUER | erning this ma | tter to | the following: | | | |
| н & м (| DELIVER | RY INC. | | Name | of Pe | rson | | | |
| 8898 N | W 110 L | ANE | | Firm/C | ompa | ny | | <u> </u> | |
| HIALEA | AH GARI | DENS FL 3 | 3018 | Ad | ldress | | | i ACCAR | 2018 JL |
| WONG | ALMAGI | JER2353@ |)GMAIL.COM | City/Stat | e and | Zip code | | HASSE | 22 1 |
| | | _ | E-mail addr | ess: (to be use | ed for | future annual report i | notification) | — , , , , , , , , , , , , , , , , , , , | |
| For fur | ther inf | ormation | concerning thi | s matter, pleas | se call | l: | | OKI OKI OKI | ر: 1 .5 ر |
| несто | R S WO | NG ALMA | | 786 | , | 368-9813 | | 2/m | 2 |
| | Name | of Person | | at (Area C | Lode | Daytime Telep | hone Number | r | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | | MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F | | | | |
| Enclos | ed is a c | heck for | the following a | imount: | | | | | |
| □ \$70 |).00 Fili | ng Fee | ☐ \$78.75 Fi Certifica | ling Fee & te of Status | | 378.75 Filing Fee & Certified Copy | | Filing F cate of S ed Copy | 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. H & M DELIVERY INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") J & A DELIVERY INC. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) GEORGIA 82-3349843 (State or country under the law of which it is incorporated) (FEI number, if applicable) N/A 5. (Date of incorporation) (Date of duration, if other than perpetual) N/A (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1805 ROSWELL RD APT 8A MARIETTA GA 30062 (Principal office address) 8898 NW 110 LANE HIALEAH GARDENS FL 33018 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) HECTOR S WONG ALMAGUER Name: 8898 NW 110 LANE Office Address: HIALEAH GARDENS 33018 (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.

A. DIRECTORS Chairman: Address: ____ Vice Chairman: ____ Address: Address: Director: B. OFFICERS HECTOR S WONG ALMAGUER President: 8898 NW 110 LANE HIALEAH GARDENS FL 33018 Address: Vice President: Treasurer: ____ NOTE: 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. HECTOR S. WONG ALMAGUER-SELF 13. _____

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

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

Control Number: 17109828

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

H & M Delivery Inc a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 16035095 Date Inc/Auth/Filed: 10/14/2017 Jurisdiction : Georgia Print Date : 07/20/2018

Form Number : 211



B: P. Kemp Secretary of State