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(((H18000260806 3)))



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Division of Corporations

: (850)617-6333 rax Number

From:

Account Name : INCORP SERVICES INC

Account Number : 12012000007

(702) 866-2500

Phone

: (702) 866-2689

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

documents@incorp.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Bushami Corporation

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COVER LETTER

ŢO:	Registration Sec Division of Cor			
OTTO			hami Corporation	
SUB	IECT:	Name of corporati	on - must include suffix	
Dear	Sir or Madam:	•		
"Cert	ificate of Existenc	ion by Foreign Corporation f e," or "Certificate of Good S n corporation to transact bus	tanding" and check are sub	t Business in Florida," mitted to register the
Please	e return all corresç	ondence concerning this mat	ter to the following:	
		Katie I	awson	
		Name	of Person	
		InCorp Se	rvices, Inc.	
	· · · · · · · · · · · · · · · · · · ·	Firm/C	ompany	_ .
		3773 Howard Hugh	es Pkwy. Suite 500S	
		Ad	dress	
		Las Vegas, N	V 89169-6014	
		City/Stat	e and Zip code	
			@incorp.com	
		E-mail address: (to be use	ed for future annual report i	notification)
For f	urther information	concerning this matter, please	se call:	
Katle	Lawson on behalf of	InCorp Services, Inc. at (702) 866-2500	
	Name of Perso			hone Number
	Registration Se Division of Co Clifton Buildir 2661 Executiv Tallahassee, Fl	rporations 18 e Center Circle U 32301	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
	osed is a check to	the following amount: \$\int \text{\$\sigma} \text{\$78.75 Filing Fee & Certificate of Status}\$	☐ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

H18000260806 3

H18000260806 3

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.

(If name unavaila	ring Corporation ble in Florida, enter alternate corporate na	me ado	pted for the purpose of transacting bus	siness in Florida)
Illinois		3	26-2659115	
(State or country	y under the law of which it is incorporated	<u> </u>	(FEI number, if applica	ble)
05/15/2008			erpetual	•
(Date	(Date of incorporation)		(Date of duration, if other than	perpetual)
Upon Filing	•			
	(Pr	incipal (office address)	EP -6
	(Current n	nailing a	iddress, if different)	E OF
. Name and stree	st address of Florida registered agent:	(P.O. I	Box <u>NOT</u> acceptable)	
Name:	InCorp Services, Inc.			<u> </u>
	17888 67th Court North			
office Address:				
office Address:	Loxahatchee ·		, Florida	

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.

Katie Lawson on behalf of InCorp Services, Inc.

(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.

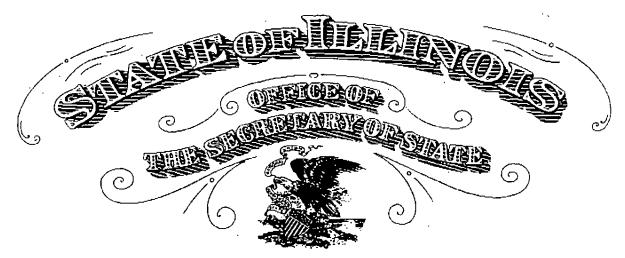
HT8000260806 3

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
· · · · · · · · · · · · · · · · · · ·	
Vice Chairman	
Address:	
Director:	•
Address:	
	-, 2
Director:	
Address:	SE SE T
	Sing to
B. OFFICERS Mariusz Pogorzelski	EFFOR E T
President: 4535 Rose St.	
Address: Schiller Park II 60176	<u> </u>
Vice President:	
Acktress:	
Katarzyna Jadwiga Secretary:	
Address: 4535 Rose St., Schiller Park, IL 60176	
Treasurer:	·
Address:	
NOTE: If necessary, you may attach an addendum to the application lists	ng additional officers and/or directors.
12. Too wells. Signature of Director or Office	
The officer or director signing this document (and who is listed in numb are true and that he or she is aware that false information submitted in a a third degree felony as provided for in s.817.155, F.S.	er 11 above) affirms that the facts stated herein
13. Mariusz Pogorzelski, President	
(Typed or printed name and capacity of person s	rigning application)

H18000260806 3

File Number

6609-120-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

Business Services. I certify that

BUSHAMI CORPORATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 15, 2008, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 6TH day of SEPTEMBER A.D. 2018 .

Authentication #: 1824902344 verifiable until 09/06/2019
Authenticate at: http://www.cyberdrivellimols.com

SECRETARY OF STATE