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(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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COVER LETTER

TO: Registration Section Division of Corporations	
Operr Service Bureau, Inc. SUBJECT:	
	ation - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	_
Please return all correspondence concerning this m Legal Department	atter to the following:
Namo	e of Person
Operr Service Bureau, Inc.	
Firm/e	Company
130-30 31st Ave., Ste. 801	
Α	Address
Flushing, NY 11354	
City/Sta	ate and Zip code
license@operr.com	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Kevin Wang 718	395 8288
	Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314
Enclosed is a check for the following amount:	
■ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy

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.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPOR	ATION,"
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of tra	nsacting business in Florida)
New York	2	83-0655397	
(State or countr	y under the law of which it is incorporated)	(FEI numbe	er, if applicable)
May 24, 2018	_	2002-01	
(Date	of incorporation) 5	Date of duration i	f other than perpetual)
N/A	or meorporation)	fixate or daragon, i	rother than perpetuary
130-30 31st Ave.	Ste. 801 - Flushing, NY 11354	1502, F.S., to determine penalty	y Hability)
	, Ste. 801 - Flushing, NY 11354	ipal office address)	v hability)
130-30 31st Ave.	, Ste. 801 - Flushing, NY 11354 (Princ		v hability)
N/A	, Ste. 801 - Flushing, NY 11354 (Princ	ipal office address) ing address, if different)	
N/A Name and stree Name:	(Princ (Current mail et address of Florida registered agent: (P	ipal office address) ing address, if different)	viability)
N/A Name and stree	(Prince) (Current mail) (Current mail) (Address of Florida registered agent: (PlinCorp Services, Inc. 17888 67th Court North Loxahatchee	ipal office address) ing address, if different)	98 9 57 (C

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.

Micole Acosta 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS WANG, Kevin S. Chairman: _ 11-10 130 Street 1st floor Address: _ College Point, N.Y. 11356 Vice Chairman: Director: ____ Director: **B. OFFICERS** WANG, Kevin S. President: 11-10 130 Street 1st floor Address: __ College Point, N.Y. 11356 N/A Vice President: ____ Address: Secretary: Address: Treasurer: Address: ____ NOTE: If necessary, you may attach an addenqum 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.

13. WANG, Kevin S. - President / CEO

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of OPERR SERVICE BUREAU INC was filed on 05/24/2018, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

I further certify that no other documents have been filed by such corporation.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 27th day of March two thousand and nineteen.

Whitney Clark

Deputy Secretary of State

Who may Clark