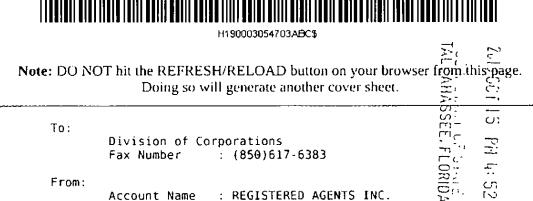
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190003054703)))



Account Number : I2009000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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 LATEK LOGISTICS USA INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
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1

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.

	TICS USA INC.			
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATIO	N,"	
(If name unavail	able in Florida, enter alternate corporate nam	adopted for the purpose of transacti	ng business	in Florida)
•	·		₹,	
New York (State or country under the law of which it is incorporated		(FEI number, if a	poličable)	ارد: ادد:
01/06/2006		,	H	<u>`</u> .:
(Date of incorporation)		(Date of duration, if other	r than perpe	etual)
•	•	·	inc.	P.
300-2 ROUTE		in Florida, if prior to registration) 1502, F.S., to determine penalty liabi	LORIDA LORIDA	ų: 53
		ipal office address)	<u>-</u>	
300-2 ROUTE	17 SOUTH, UNIT B LODI NJ 07644			
······································	(Current mai	ing address, if different)	***************************************	
Name and stre	et address of Florida registered agent: (P Registered Agents Inc.	.O. Box <u>NOT</u> acceptable)		
ffice Address:	7901 4th St N STE 300			
	St. Petersburg	, Florida <u>33702</u>		
		(Zip code)		

(Registered agent's signature)

Bill Havre

Registered Agents Inc.

- Assistant Secretary

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.

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.

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

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director: KAGAN BAS	CCT AHAS
Address: 7901 4th St N STE 300	S. U.
St. Petersburg FL 33702	F P P P P P P P P P P P P P P P P P P P
Director:	081 4: 1:
Address:	A G
B. OFFICERS	
President: KAGAN BAS	
Address: 7901 4th St N STÉ 300	
St. Petersburg FL 33702	
Vice President:	
Address:	
Secretary: KAGAN BAS	
Address: 7901 4th St N STE 300 St. Petersburg FL	. 33702
Treasurer: KAGAN BAS	
Address: 7901 4th St N STE 300 St. Petersburg FL 33702	
NOTE: If necessary, you may attach an addendum to the	application listing additional officers and/or directors.
12.	
The officer or director signing this document (and who is I	rector or Officer isted in number 11 above) affirms that the facts stated herein ubmitted in a document to the Department of State constitutes

13. KAGAN BAS, PRESIDENT

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of LATEK LOGISTICS USA INC. was filed on 01/06/2006, 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.



Witness my hand and the official seal of the Department of State at the Gity of Albany, this 11th day of October 1, two thousand and nineteen.

Braden C Higher

Brendan C. Hughes

Executive Deputy Secretary of States

201910150256 * MG