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SA PRESIDENCE SERVICES

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### **COVER LETTER**

TO:	Registration Section Division of Corporations				
CHDI	PASHA CARRIER INC.				
SUBJ	ECT: Nai	ne of corporation	- must include suffix		
Dear S	Sir or Madam:				
"Certi	nclosed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation	cate of Good Star	iding" and check are subir		
	return all correspondence conc S NIKHMAN	erning this matte	r to the following:		
		Name of	Person		
RELIA	ABLE ACCOUNTING SERVICES	INC			
		Firm/Con	npany		
2903 C	DCEAN AVE				
		Addr	ess		
BROO	KLYN, NY 11235				
		City/State a	nd Zip code		
NIKH	MANS@AOL.COM				
	E-mail add	ress: (to be used	for future annual report no	otification)	
For fu	rther information concerning thi	s matter, please	:all:		
BORIS NIKHMAN 718		743-3047	743-3047		
	Name of Person	at ( Area Cod	e Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			Registration Sec Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclos	sed is a check for the following a	amount:			
□ \$70	0.00 Filing Fee	iling Fee & — E te of Status	1 \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status & 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.

PASHA CARR L	IER INC.		
(Enter name of c	orporation; must include "INCORPORATED, orp." "Inc." "Co." or "Corp.")	" "COMPANY," "CORPORA"	TION,"
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of trans	sacting business in Florida)
NEW YORK 2.	3.	46-3052308	_
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
	of incorporation)	(Date of duration, if other than perpetual)	
6.			
7	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1 VE, SUITE 1H, BROOKLYN, NY 11218 (Princi) VE, BROOKLYN, NY 11235		liability)
0.21		ng address, if different)	2020 JAN 13
8. Name and <u>street address</u> of Florida registered agen  PAVEL PANYSH  Name:		O. Box <u>NOT</u> acceptable)	A P D
Office Address:	1980 S OCEAN DRIVE, STE 5P		5 - <del>5</del> - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -
	HALLANDALE	, 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:

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.  PAYEL PARYSH PRESIDENT	A. DIRE	CTORS
Address:  Director: Address:  Director: Address:  B. OFFICERS  President: 1980 S OCEAN DRIVE, STE 5P  HALLANDALE, FL 33009  Vice President: Address:  Sceretary: Address:  Treasurer: Address:  Treasurer: Address:  Treasurer: Address:  NOTE: If presessary, you may attach an addendum to the application listing additional officers and/or directors.  12. **  Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the lacts stated herein are true and that he or she is aware that false informations submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.  PRAYEL PANYSE DEANYSE DEPOSITIONS	Chairman:	PAVEL PANYSH
Vice Chairman:  Address:  Director:  Address:  B. OFFICERS  PAVEL PANYSH  Persident:  Address:  1980 S OCEAN DRIVE, STE 3P  HALLANDALE, FL 33009  Vice President:  Address:  Secretary:  Address:  Treasurer:  Address:  NOTE: If pressary, you may attach an addendum to the application listing additional officers and/or directors.  12. **  Signature of Director or Officer  The officer or director signing this document (and who is fisted 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.  PANYEL PANYSH — PRESIDENT		
Address:  Director: Address:  Director: Address:  B. OFFICERS  President: PavEL PANYSH  1980 S OCEAN DRIVE, STE 5P  HALLANDALE, FL 33009  Vice President: Address:  Treasurer: Address:  Treasurer: Address:  NOTE: If incressary, 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. PAMEL PANYSH. — PRESENSET.	1	FALLANDALE, FL 33009
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B. OFFICERS  President:    1980 S OCEAN DRIVE, STE 5P	_	
B. OFFICERS  President:    1980 S OCEAN DRIVE, STE 5P	Director: _	
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13. TAVEL PARTSH PRESIDENT	The office are true ar a third deg	or or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S.  EL PANYSH PRESIDENT

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of PASHA CARRIER INC. was filed on 06/21/2013, 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.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 02nd day of January two thousand and twenty.

Braden C. Hydra

Brendan C Hughes

Executive Deputy Secretary of State