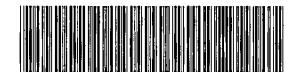
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: St. Lawrence Steel C	orp.		
Sommer.	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by For "Certificate of Existence," or "Cerabove referenced foreign corporat	rtificate of Good Stan	Authorization to Transact Business ding" and check are submitted to ress in Florida.	in Florida." gister the
Please return all correspondence of Jeanette A Perry	oncerning this matter	to the following:	
	Name of I	Person	
St. Lawrence Steel Corp.			
	Firm/Com	pany	
192 Francis Dr NE		20	
Address			
Port Charlotte Fl 33952			+ 1;
	City/State ar	nd Zip code	
jperry100064@gmail.com			<u>;;</u>
E-mail	address: (to be used f	or future annual report notification)	
For further information concerning	g this matter, please c	all:	<u> ૩</u>
John C Perry	at (287-4750	
Name of Person	Area Code	Daytime Telephone Number	er
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, St Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	IIDA DEPARTMENT	I \$78.75 Filing Fee & ☐ \$87.5 Certified Copy Certif	0 Filing Fee. ficate of Status & fied 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.

1.	St. Lawrence Steel Corp.				
		orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp,")	COMPANY," "CORPORATION,"		
	Saint Lawrence	Steel Corp			
	(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting hu	siness in Florida)	
2.	New York	3.			
	2. (State or country under the law of which it is incorporated) (FEI numb		(FEI number, if applica	per, if applicable)	
4.	5/12/1993	5.			
	4. (Date of incorporation) 5		(Date of duration, if other than perpetual)		
6.					
١,.		(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502	orida, if prior to registration)		
		(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability)		
7	192 Francis Dr N	E Port Charlotte, Fl 33952			
		(Principal office	street address)		
		(Current mailing a	ddress, if different)		
				202	
8.	Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	2020 Jr	
	<u></u>	Jeanette A. Perry	· · · · · · · · · · · · · · · · · · ·		
	Name:			. ∑3	
0	ftice Address:	192 Francis Dr NE			
		Port Charlotte	— , Florida ³³⁹⁵²	9	
		(City)	, Florida (Zip code)	ယ	

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	Name:	□Chairman	Name:			
□Vice Chairman	Address: 192 Francis Dr NE	□Vice Chairman	Address:			
□Director	Port Charlotte, Fl 33952	Director				
■President		□President				
□Vice President		□Vice President	-			
□Secretary	□Treasurer	□Secretary		□Treasurer		
□Other	Other	□Other		Other		
□Chairman □Vice Chairman □Director □President	Name:	□Chairman □Vice Chairman □Director □President	Address:			
■ Secretary	☐ Treasurer	□ Vice President □ Secretary		☐Treasurer		
Other	Other	□Other		□Other		
□Chairman □Vice Chairman □Director	Name:	□Chairman □Vice Chairman □Director		23		
□President		□President				
□Vice President	-	□Vice President				
□Secretary	■ Treasurer	□Secretary		☐Treasurer		
□Other	□Other	□Other		□Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. 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. Jeanette A. Perry						

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ST. LAWRENCE STEEL CORP. was filed on 05/12/1993, 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.



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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 09th day of January two thousand and twenty.

Braden C Hydra

Brendan C Hughes
Executive Deputy Secretary of State