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COVER LETTER

_	sistration Section ision of Corporations	;				
SUBJECT	: RELIABLE	SHIPPING			•	
		Name of corporat	ion - must in	iclude suffix		
Dear Sir or	Madam:					
"Certificate	ed "Application by Fo of Existence," or "C enced foreign corpora	ertificate of Good S	Standing" and	i check are subn		
Please retur	n all correspondence	concerning this ma	tter to the fo	llowing:		
(Claudio 91	Balectre	1			
	- tractation	-	of Person			
	Reliable	Shipping Co	enices	,		.
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For further	information concerni	ng this matter, plea	se call:			
Claud	me of Person	at (63)	/	345708 Daytime Teleph	none Number	
Reg Div The 241	REET/COURIER Agistration Section vision of Corporation & Centre of Tallahass 5 N. Monroe Street,	s ee		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, Fl	ection prporations	
Tal	lahassee, FL 32303	•				
		_	□ \$78.75	TE Filing Fee & ed Copy	\$87.50 File	e of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	n Florida, enter alternate corporate	•	_	Florida)
New Yo	RK	aed) 3. <u>2043</u> (FEI	349043	
State or country und	er the law of which it is incorporat	ed) (FEI	number, if applicable)	
2/3	Corporation (5(Date of dura	otion if other than perpetual	<u></u>
(Date/of in	1/1/2020	(Date of dura	ation, if other than perpetual	,
		iness in Florida, if prior to reg	gistration)	
	(SEE SECTIONS 607.1501 &	607.1502, F.S., to determine	penalty liability)	_
601 N	E 23/05 =	Soite 605	7/11/1 PU. 33	137
		oal office street address)	· · · ·	
				 -
	(Current	mailing address, if different)	1	
ama and street add	trong of Florida registered agent	· (D.O. Poy NOT against	abla)	
ame and street add	lress of Florida registered agent	. (F.O. BOX <u>NOT</u> accepta	loie)	L F-2
Name:C	JAMES D'ILIO		•	•
e Address:	601 NE 23 ST	- Surfe 602	-	12
	MAMI	, Florida <u>33</u>	137	<u></u>
	(City)		code)	4.
egistered agent's ng been named a	acceptance: s registered agent and to accep	t service of process for the	e above stated corporation	n at the
	ication, I hereby accept the ap	pointment as registered at	gent and agree to act in t	his capa
	ly with the provisions of all stai			nce of m
r agree to compl	and accept the obligations of	my position as registered.		
er agree to compl	and accept the obligations of			
er agree to compi am familiar with	and accept the obligations of			

under the law of which it is incorporated.

A. DIRECTORS				
Chairman	Name: Eleonold Chievelli	□Chairman	Name:	
□ Vice Chairman	Address: 173 Baker CT	□Vice Chairman	Address:	
□Director	15cAnd Park 1411558	□Director		
President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	□ Other	□Other		□Other
□Chairman	Name: Claudio M. Baksto Address: 173 Bakor CT	□Chairman		
	Address: 173 139407 C1	□Vice Chairman		
□Director	ISLAMO PARKNYUSTE	□Director		tows.
□President		□President		<u> </u>
☑Vice President		□Vice President	+	
□Secretary	□Treasurer	□Secretary		□Treasurer (50)
□Other		Other		□Other
□Chairman	Name: Janes P. Dilio			□Other
□Chairman	Name: Janes P. Dilio Address: 60INE 23.78 55	□Chairman	Name:	<u></u>
□Chairman	Name: James P. Dilio Address: 601NE 23.78 57 Art 602	□Chairman	Name:	<u> </u>
□Chairman □Vice Chairman	Name: Janes P. Dilio Address: 60INE 23.78 55	□Chairman □Vice Chairman	Name:	<u> </u>
□Chairman □Vice Chairman □Director	Name: James P. Dilio Address: 601NE 23.78 57 Art 602	□Chairman □Vice Chairman □Director	Name:	27
□Chairman □Vice Chairman □Director □President	Name: James P. Dilio Address: 601NE 23.78 57 Art 602	□Chairman □Vice Chairman □Director □President	Name:	<u> </u>
☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President	Name: James P. Dilio Address: GOINE 23.78 57 Art 602 MIAMI PIA 33137	□Chairman □Vice Chairman □Director □President □Vice President	Name:	37
□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other	Name: James P. Dilio Address: GOINE 23.78 57 Art 602 MIAMI PIA 33137	□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other □Chment will be image at of State Annual R	Name: Address: ed for reporting pa	☐Treasurer ☐Other
□ Chairman □ Vice Chairman □ Director □ President □ Vice President □ Secretary □ Other Important Notice: individuals may be 12 The officer or dire	Name: Janes P. Dilio Address: 601NE 23. 45 Ar. 602 M.AM. DIA 33133 Treasurer Other Use an attachment to report more than six (6). The attack added to the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the index when filing your Florida Department of the control of the c	□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other □chment will be imagent of State Annual R	Address: ed for reporting preport form.	☐Treasurer ☐Otherarposes only. Non-indexed

I hereby certify, that the Certificate of Incorporation of RELIABLE SHIPPING SERVICES INC. was filed on 02/03/2006, 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.



2016 ETC -2 1 T12: 15

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 11th day of February two thousand and twenty.

Brada C Hyles

Brendan C Hughes
Executive Deputy Secretary of State