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COVER LETTER

	stration Section sion of Corporations			·
SUBJECT:	Cambrian Group Inc.			
SOBJECT.	Name	c of corporation	- must include suffix	
Dear Sir or M	ladam:			
"Certificate o	"Application by Foreign of Existence," or "Certificated foreign corporation to	te of Good Stand	ling" and check are sub	ct Business in Florida," emitted to register the
Please return	all correspondence concer	ning this matter	to the following:	
Jason Camacho	o			
		Name of P	erson	
Cambrian Grou	ip Inc.			
·		Firm/Comp	pany	
2840 Delaware	Ave			
		Addres	S	
Kenmore, NY	14217			
		City/State an	d Zip code	
info@ellicottre	coverygroup.net			
	E-mail addres	ss: (to be used fo	r future annual report n	notification)
For further inf	ormation concerning this i	natter, please ca	11:	
Jason Camacho	•	716	390-4620	
Namo	e of Person	Area Code	Daytime Teleph	none Number
Regist Division The C 2415 N	ration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 81 assee, FL 32303		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, FI	ection orporations
	check for the following am sek payable to: FLORIDA D ng Fee S78.75 Filit Certificate	EPARTMENT On the second	OF STATE \$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.

1.	Cambrian Grou	ıp Inc.				
•	(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "Co	ORPORATION,"		
	Cambrian Grou	p Inc. of New York				
	(If name unavai	lable in Florida, enter alternate corporate name	adopted for the purpos	se of transacting busi	ness in Flori	da)
2.	NY		84-3430470			
	(State or count	ry under the law of which it is incorporated)	(FE	I number, if applicab	lc)	
4.	10/17/2019	5.	perpetual			
	(Date	e of incorporation)	(Date of dur	ation, if other than po	erpetual)	
6.						
		(Date first transacted business i	n Florida, if prior to re	gistration)		
7	240 Delaware A	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine	penalty hability)		
7		Ave, Kenmore, NY 14217				
		(Principal off	ice <u>street</u> address)			
-		(Current mailin	ng address, if different)		<u>;/ı - 184</u>	
		(.g =======,,	e E		77
8.	Name and stree	et address of Florida registered agent: (P.C). Box <u>NOT</u> accepta	ible)	APP E	
	Name:	InCorp Services, Inc.		i E	فلم أمار	T
Off	ice Address:	17888 67th Court North				Ċ
		Loxahatchee	. Florida 33470	1	35.7 KM	
		(City)	, ,	code)	r	

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.

Georgia Dorsam 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.

A. DIRECTORS	•		
□ Chairman	Jason Camacho Name:	Chairman	Name:
□Vice Chairman	Address: 2840 Delaware	Vice Chairman	Address:
Director	Kenmore, NY 14217	Director	
□President		□ President	
□Vice President		□ Vice President	
☐ Secretary	□Treasurer	□ Secretary	□Treasurer
Other	□Other	Other	□Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		Director	
President		President	
□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	Other	Other
□Chairman	Name:	Chairman	Name:
□Vice Chairman	Address:	Uvice Chairman	Address:
□Director		Director	
□President		President	
□Vice President		Vice President	
JSecretary	☐Treasurer	□ Secretary	□Treasurer
10ther	Other	Other	Other
!. Jaso	Use an attachment to report more than six (6) added to the index when filing your Florida I	Department of State Annual Rep	port form.

Jason Camacho Director

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of CAMBRIAN GROUP INC. was filed on 10/17/2019, 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 City of Albany, this 19th day of March two thousand and twenty.

Braden C Hylan

Brendan C Hughes
Executive Deputy Secretary of State