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MAY 20 2020 M. SOLOMON

COVER LETTER

TO:		tration Section on of Corporations					
SUBJI	ECT:	REDVERTEX INC.					
3000	DCT.	Name o	f corporation	- must	include suffix		
Dear Si	ir or M	adam:					
"Certif	icate of	"Application by Foreign Corf Existence," or "Certificate of the Coreign corporation to transfer to the Corporation to the Corpo	of Good Stan	ding" a	nd check are sub	ct Busi mitted	ness in Florida," to register the
Please	return a	all correspondence concernin	g this matter	to the f	ollowing:		
KONS	TANTI	NA CHILINGIROVA					
		· · · · · · · · · · · · · · · · · · ·	Name of	Person			
LAWC	OFFICE	S OF KONSTANTINA CHILII	NGIROVA				
			Firm/Com	pany			
1510 G	RANT	AVENUE					
			Addre	ess	. ,		
SAN FI	RANCI	SCO CA 94133					
		,,-	City/State a	nd Zip o	ode	-	
chilingi	irova@g	gmail.com					
		E-mail address:	(to be used f	or futur	e annual report n	otifica	tion)
For fur	ther inf	Cormation concerning this ma	itter, please c	all:			
Konstantina Chilingirova 415			377	377 9977			
-	Name	e of Person	Area Code	/ ?	Daytime Telepl	hone N	umber
	Regist Divisi The C	tration Section fon of Corporations entre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporat 7	ions
	nake ch	check for the following amore cek payable to: FLORIDA DE ng Fee S78.75 Filing Certificate of	PARTMENT Fee &	\$78.7	ATE 5 Filing Fee & Ted Copy	(887.50 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.

(If name unavail) 2. DELAWARE	able in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in	Florida)
	y under the law of which it is incorporated) (FEI number, if applicable)	
4. February 27, 20	20	5. perpetual	
	of incorporation)	(Date of duration, if other than perpetual	<u> </u>
6. March 26, 2020			
	(SEE SECTIONS 607.1501 & 60	ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	
7	nue, Penthouse 5 Miami, Florida 33131		
same as above	(Principal	office <u>street</u> address)	* 1/3
	(Current ma	ailing address, if different)	;
8. Name and <u>stree</u> Name:	et address of Florida registered agent: (Dimitar Rashkov	P.O. Box NOT acceptable)	Property of the second
Office Address:	848 Brickell Avenue, Penthouse 5		0.0 1.0 (*)
	Miami	, Florida 33131	.90° ***
	(City)	(Zip code)	
designated in this further agree to c	ed as registered agent and to accept se application, I hereby accept the appoi	ervice of process for the above stated corporation intment as registered agent and agree to act in the relative to the proper and complete performant position as registered agent.	his capacity.

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

•	-;
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•	
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C	• -/

A. DIRECTORS	•						
■ Chairman	Name:	□Chairman	Name: Dian Shishkov				
□Vice Chairman	Address: 848 Brickell Avenue, Penthouse 5	□Vice Chairman	Address: 848 Brickell Avenue, Penthouse f				
Director	Miami, FL 33131	Director	Miami, FL 33131				
■ President	E0	□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		□Vice President	. 2				
☐ Secretary	□Treasurer	Secretary	□Treasurer				
Other	□Other	□Other					
□Chairman	Name:	□Chairman	Name:				
	Address:		Address:				
□ Director	Address.		Address:				
	· · · · · · · · · · · · · · · · · · ·	□ Director					
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.							
13.	Dimitar k	Lashkov	CEDA President				
(Typed or printed name and capacity of person signing application)							



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "REDVERTEX INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTIETH DAY OF APRIL, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REDVERTEX INC."

WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



Authentication: 202856345

Date: 04-30-20