# Faccomasy

(Requestor's Name)					
(Address)					
(Address)					
/State/Zip/Phon	e #)				
WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certificate	s of Status				
Special Instructions to Filing Officer:					
	ress)  /State/Zip/Phon  WAIT  iness Entity Na  ument Number				

Office Use Only



100345422991

60/23/20--51910--022 \*\*70.00

FILED
2020 MAY 29 PM 2: 28
SECRETARY OF STATE



## **COVER LETTER**

TO:	Registration Section Division of Corporation	ons			
SHRJ	JECT:	ASML	. TRUCKIN	G GROUP INC.	
500		Name of c	orporation	- must include suffix	
Dear S	Sir or Madam:				
"Certi		*Certificate of	Good Stanc	Authorization to Transact l ling" and check are submi s in Florida.	
Please	return all corresponden	ce concerning	this matter	to the following:	. ~2
			VIOLET HO	OWARD	TALL DE
			Name of I	Person	AY 29
			Firm/Comp	pany	E P
		30	6 NE 2ND	ST STE 12	FL(2) 5:
		<del></del>	Addre	SS	28 28 28
		DE	LRAY BEA	ACH, FL 33483	<i>7</i>
		С	ity/State an	id Zip code	
		<u>-</u>		ird@gmail.com	
	E-r	nail address: (to	o be used fe	or future annual report not	ification)
For fu	rther information conce	rning this matte	er, please ca	all:	
	VIOLET HOWARD	at (	561	908-4250	
	Name of Person		Area Code	Daytime Telepho	ne Number
	STREET/COURIER Registration Section Division of Corporation The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 3230	ons ssee et, Suite 810		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion orations
Please	——————————————————————————————————————		RTMENT		<ul><li>\$87,50 Filing Fee,</li><li>Certificate of Status &amp;</li><li>Certified Copy</li></ul>

## 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 unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)		
COLORADO 3.		85-1174021		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
5/8/2019		PERPETUAL 30 E		
(Date of incorporation)		(Date of duration, if other than-perpetual)		
·		in Florida, if prior to registration)  502, F.S., to determine penalty liability)		
	DELRAY BEACH, FL 33483			
	(Principal of	fice street address)		
	(Current maili	ng address, if different)		
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)		
Name:	VIOLET HOWARD			
Office Address:	306 NE 2ND ST STE 12			
	DELRAY BEACH	 .   Florida		
	(City)	(Zip code)		

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	VIOLET HOWARD Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	DELRAY BEACH, FL 33483	Director	DELRAY BEACH, FL 33483	
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	2020 M	
□Vice President		□Vice President	THAY 29	
☐ Secretary	□Treasurer	☐ Secretary	in-s	
□Other	Other	□Other	Treasurer The Company of the Company	
□Chairman	Name:	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President	<u></u>	
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	Treasurer	
□Other	□Other	□Other	Other	
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Depo	rtment of State Annual Re		
12.	Signature of Direct	tor or Officer		
	etor signing this document (and who is listed in nu- alse information submitted in a document to the De			
13.	VIOLET HOWARD	PRESIDENT		

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

ASML TRUCKING GROUP INC.

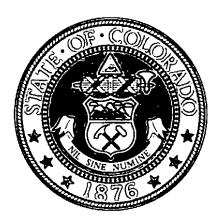
is a

#### Corporation

formed or registered on 05/08/2019 under the law of Colorado, has complied with att applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20191395589.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/22/2020 that have been posted, and by documents delivered to this office electronically through 05/26/2020 @ 11:39:39.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed and issued this official certificate at Denver, Colorado on 05/26/2020 @ 11:39:39 in accordance with applicable law. This certificate is assigned Confirmation Number 12361683



Secretary of State of the State of Colorado

\*\*\*\*\*\*\*\*\*\*\*End of Certificate\*\*\*\*\*

Notice A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.vovstate.com/state/SearchCriteria do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.vovstate.com/schice/Conschied/Confirming-the-issuance-of-acertificate/Conschied/Confirming-the-issuance-of-acertificate/Conschied/Confirming-the-issuance-of-acertificate/Conschied/Confirming-the-issuance-of-acertificate/Conschied/Confirming-the-issuance-of-acertificate/Conschied/Confirming-the-issuance-of-acertificate/Conschied/Confirming-the-issuance-of-acertificate/Confirming-the-issuance-of-acertificate/Confirming-the-issuance-of-acertificate-of-acertificate/Confirming-the-issuance-of-acertificate-of-acerti