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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HUBCO

Account Number: 104662002400 Phone: (516)935-3940 Fax Number: (516)935-3088

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: andrew@ahcpapllc.com

20 CT 16 PM 3: 08

FOREIGN PROFIT/NONPROFIT CORPORATION RESO INC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

H20000361195

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.

RESO INC	COLADA NO. "CONTO DATION"	
(Name of corporation; must include the word "INCOR "Inc.," "Co.," "Corp.," "Inc," "Co." or "Corp.")	PORATED", "COMPANY", "CORPORATION	
If name unavailable in Florida, enter alternate corporate name	e adopted for the purpose of transacting business	in Florida)
2 MASSACHUSETTS	3	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
4. 06-14-2019	5. PERPETUAL	
(Date of incorporation)	(Duration: Year corp. will cease to e	xist or "perpetual")
6. N/A		
(Date first transacted busi	ness in Florida if prior to registration.) 607.1502. F.S., to determine penalty liability)	
7. 1930 AVENUE L, RIVIERA BEACH, FL 334	03	
	ripal office address)	
1930 AVENUE L, RIVIERA BEACH, FL 334	303	
	ent mailing address)	
8. Name and street address of Florida registered agent:	(P.O. Box NOT acceptable)	 :N
Name: STANISLAV KONTANISTOV		Auto-1 ^{mg}
		<u>.</u> .
Office Address: 1930 AVENUE L		
RIVIERA BEACH	, Florida, <u>33403</u>	,
(City)	(Zip code)	
9. Registered agent's acceptance:		
Having been named as registered agent and to accept servi this application, I hereby accept the appointment as registe with the provisions of all statutes relative to the proper and the obligations of my position as registered agent	red agent and agree to act in this capacity. I fu	rther agree to comply
// /		
(Registered age	ent's signature) STANISLAV KONTANISTOV	<i>!</i>

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.

H20000361195

A. DIRECTOR	(S(Street address only - P.O. Box NOT acceptable)	
Chairman:		
Address:		
Vice Chairman	N	
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICEI	RS	
President:	STANISLAV KONTANISTOV	
Address:	1930 AVENUE L, RIVIERA BEACH, FL 33403	
		
Vice Presiden	C	<u> </u>
Address:		
-		
Secretary:		<u> </u>
Address:		
<u></u>		
Treasurer:		
Address:		
NOTE: If no	cessary, you may attach an addenduch to the application listing additional officers and/or directors.	
12	(Signature of Director or Officer listed in number 12 of the application)	
13	STANISLAV KONTANISTOV - PRESIDENT	



Commonwealth

The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

Date: October 14, 2020

To Whom It May Concern:

I hereby certify that according to the records of this office,

RESO INC

Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Certificate Number: 20100309610

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

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