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From:

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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	able in Florida, enter alternate corporate name ad	dopted for the purpose of transacting business in Florida)	
New York	3.		
(State or counts	y under the law of which it is incorporated)	(FEI number, if applicable)	
MARCH 21, 20	16 5.		
(Date	of incorporation)	(Date of duration, if other than perpetual)	
08/08/2018			
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		
99 Wall Street, S	uite 2168, New York, NY 1005-4329	, , , , , , , , , , , , , , , , , , , ,	
	(Principal office	street address)	
99 Wall Street, S	uite 2168, New York, NY 1005-4329		
	(Current mailing	address, if different)	
		ASSECT AND ASSECT ASSECT AND ASSECT ASSECT AND ASSECT ASSECT AND ASSECT ASSECT AND ASSECT ASSECT AND ASSECT ASSECT AND ASSECT A	
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Veorp Services, LLC	(P.O. Box NOT acceptable) (P.O. Box NOT acceptable) Florida 33314 (Zin code)	
llice Address:	5011 South State Road 7, Suite 106		
	Davie	, Florida 33314 (Zip code)	
	(City)	- , r kinda	

(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.

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A. DIRECTORS					
■ Chairman	Ido Sella Name:	□Chairman	Name:		
☐ Vice Chairman	Address:	□Vice Chairman	Address:		
Director	New York, NY 1005-4329	□Director			
□President		□President			
□ Vice President		□Vice President			
□Secretary	[]Treasurer	ElSecretary	□Treasurer		
□Other	Other	□Other	Other		
□ Chairman	Name:	□ Chairman	Name:		
□ Vice Chairman	Address:	☐ Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□ Vice President		□ Vice President			
□Secretary	□Treasurer	□Secretary	□Treasurer [5]		
□Other	Other	□Other	Other		
□ Chairman	Name:	ZIChairman	Name:		
□ Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		Director			
CIPresident		□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 \$.817.155, F.S.

, Ido Sella, Chairman

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State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ECONGRETE INC. was filed on 03/21/2016, 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. I further certify the following:

A Biennial Statement was filed 04/23/2019.

A Biennial Statement was filed 09/29/2020.

I further certify that no other documents have been filed by such corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 13th day of May two thousand and twenty-one.

Braden C Hydra

Brendan C. Hughes
Executive Deputy Secretary of State

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