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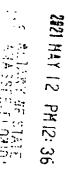
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COVER LETTER

	gistration Section vision of Corporations					
	r: The Torque Logist	ies Co.				
Somme.			on - mu	ist include suffix		
Dear Sir or	Madam:					
"Certificate	ed "Application by Foreig of Existence," or "Certif enced foreign corporation	icate of Good S	anding	and check are sub		
Please retu	rn all correspondence con	cerning this mat	ter to th	e following:		
Jean-1	Noel Ben Hamou					
		Name	of Perso	าก		
Ben F	lamou Benchetrit Law Gr	oup LP				
		Firm/C	ompany			
12 Ch	ristopher Way, Suite 102					# 1 D
		Ad	dress			<u> </u>
Eaton	itown, NJ, 07724					
		City/State	and Zi	p code		
Jben	hamou@bhlg.com					81/2: 25/31/4 25/04/
	E-mail ad	dress: (to be use	d for fu	ture annual report i	notification)	0:: 36 36
For further	information concerning t	his matter, pleas	e call:			
Jean-l	Noel Ben Hamou	at (<u>404</u>) _	202-3115		
No	ame of Person	Area C	ode	Daytime Telep	hone Number	
Reg Div The 241	REET/COURIER ADD gistration Section vision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suit dahassee, FL 32303			MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	lection orporations 7	
	-		□ <u>.</u> \$78	STATE 3.75 Filing Fee & rtified Copy		of Status &

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 unavaila	ible in Florida, enter alternate corporate name a	adopted for the purpose of transacting be	usiness in Florida)
2. Delaware	_ 3.	86-3573209	
(State or country	v under the law of which it is incorporated)	(FEI number, if applic	able)
4. April 26, 201	215.	(Date of duration, if other than	
(Date	of incorporation)	(Date of duration, if other than	perpetual)
6. <u>N/A</u>			
	(Date first transacted business in (SEE SECTIONS 607,1501 & 607,15	Florida, if prior to registration) 02, F.S., to determine penalty liability)	
7. <u>18851 NE 290</u>	h Ave, Suite 761 Aventura, FL 33180		
		ce <u>street</u> address)	
12 Christopher	Way, Suite 102. Eatontown, NJ, 07724	g address, if different)	
8. Name and <u>stree</u> Name:	t address of Florida registered agent: (P.O Jean-Noel Ben Hamou). Box <u>NOT</u> acceptable)	MOI MAY 12 PH 12: 36
Office Address:	20801 Biscayne Blvd, Suite 403		PA 12: 1
	Aventura	. Florida <u>33180</u>	표 전체 3
	(City)	(Zip code)	· •••
designated in this further agree to co	ed as registered agent and to accept service application. I hereby accept the appointmomply with the provisions of all statutes rewith and accept the obligations of my pos	nent as registered agent and agree to elative to the proper and complete p sition as registered agent.	o act in this capacity. I
	(Registered agent's sig		

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.

۸ ۱	m	RECT	ORS
	.,.		

□Chairman	Name: Eliyahou Menachem Meir BENHAMOU	□Chairman	Name: Yossi Castiel	
□Vice Chairman	Address: 12 Christopher way, suite 102	□Vice Chairman	Address: 12 Christopher way, suite 102	
⊠Director	Eatontown, NJ, 07724	X Director	Eatontown, NJ, 07724	
□President		X :President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	☐Treasurer	
□Other	□Other	□Other	□Other	
□ Chairman	Name: Moshe Castiel	□Chairman	Name: Isaac Castiel	
□Vice Chairman	Address: 12 Christopher way, suite 102	□ Vice Chairman	Address: 12 Christopher way, suite 102	
⊠Director	Eatontown, NJ, 07724	⊠ Director	Eatontown, NJ, 07724	
□President		□President		
□Vice President		□Vice President	D	
□ Secretary	₹Treasurer	☐ Secretary	☐Treasurer HA	
□Other		□Other		
□Chairman	Name: Jean-Noel Ben Hamou	□Chairman	Name: SF PK IZ	
□Vice Chairman		□ Vice Chairman	Address:	
□Director	Eatontown, NJ, 07724	□Director		
□President		□President		
□Vice President		□Vice President		
X Secretary	□Treasurer	☐ Secretary	□Treasurer	
□Other	□Other	□Other	□Other	
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Departme	at of State Annual Re	eport form.	
12	Signature of Director o			
The officer or dire	Signature of Director o ctor signing this document (and who is listed in number also information submitted in a document to the Depart	r 11 above) affirms th	nat the facts stated herein are true and that he or	
13	Jean-Noel Ben Hamou, Secretary (Typed or printed name and capacity of perso			
	(Typed or printed name and capacity of perso	on signing application)	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "THE TORQUE LOGISTICS CO." 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 FOURTH DAY OF MAY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE TORQUE LOGISTICS CO." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF APRIL, A.D. 2021.

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

A CANADA CANADA

Authentication: 203126564

Date: 05-04-21

5871641 8300 SR# 20211575976