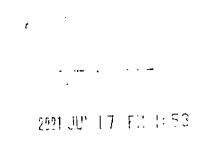
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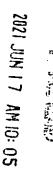
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DATE:

6/17/2021

NAME:

SOCIOS SERVICES US INC.

TYPE OF FILING: APPLICATION

COST:

78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abbie to

#### **COVER LETTER**

TO:	Registration Section Division of Corporations Socios Services US Inc.	
SUBJ	Name of corporation - must include suffix	1
	14atile of corporation a linear metade suring	
Dear S	or Madam:	
"Certi	osed "Application by Foreign Corporation for Authorization to Transact Business in the of Existence," or "Certificate of Good Standing" and check are submitted to reginal ferenced foreign corporation to transact business in Florida.	Florida," ster the
Please	turn all correspondence concerning this matter to the following:	1
	Maxim Yuri Rabinovitch	
	Name of Person	
	Socios Services US Inc.	
	Firm/Company	
	8275 S Eastern Avenue, Suite 200-648	25
	Address	72
	Las Vegas, Nevada, 89123	
	City/State and Zip code	7021 JUN 17
	max@chiliz.com	
	E-mail address: (to be used for future annual report notification)	
For fu	er information concerning this matter, please call:	A 10: 05
ı	xim Yuri Rabinovitch at ( 702 ) 818-1220	
	Name of Person Area Code Daytime Telephone Number	'
Please	Certificate of Status Certified Copy Certifi	Filing Fee, cate of Status & ed 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. Socios Services US Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc." "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bisiness in Florida) (State or country under the law of which it is incorporated) (FEI number, if applicable) May 28, 2021 (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 8275 S Eastern Avenue, Suite 200-648, Las Vegas, Nevada 89123 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corp2000, Inc. Name: 155 Office Plaza Dr. Suite A Office Address: Tallahassee \_\_\_, Florida (City) (Zip code) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. 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 is in a secretary. 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 [upito six

A. DIRECTORS  Chairman  Vice Chairman  Director  President	Maxim Yuri Rabinovitch Name: 8275 S Eastern Avenue, Suite 200-648, Las Vegas, NV	□Chairman □Vice Chairman ☑Director □President	Name: Address: Suite 2	827	s	Easte	rn Avenue, legas, NV	
☐ Vice President		☑Vice President			Ü			
Secretary □		Secretary			П	reasur	er 	
Other		☐ Other				)ther _	<u> </u>	
□Chairman	Name:	□ Chairman	Name:		 	<u> </u>		
☐Vice Chairman	Address:	□Vice Chairman	Address:			<u> </u>		
□Dírector		☐ Director						
□President		President						
□Vice President		□Vice President						
Secretary	[] Treasurer	☐ Secretary				reasu	 rer 	
Other	□Other	□Other				Other_	2021 JUH	[F."
☐ Chairman	Name:	□ Chairman	Name:			<u> </u>	= =	. 1 Lame
□Vice Chairman	Address:	□ Vice Chairman	Address:			ļ	70万里	
□ Director		Director	·				To a	
□President		□President					<u> </u>	
☐Vice President		☐ Vice President	<u> </u>				<u></u>	
Secretary	☐Treasurer	Secretary	!			Tr <del>easu</del>	  er 	
Other	Other	□Other				Other .		
individuals may b	Use an attachment to report more than six (6). To added to the Index when filing your Florida De	partment of State Annual I	ged for repor Report form.	ing pu		es ont	y. Non-indexed	
	Signature of Di				]			
The officer or dire she is aware that f s.817.155, F.S.	ector signing this document (and who is listed in alse information submitted in a document to the	number U above) affirms Department of State consti	that the facts tutes a third	stated degree	cl	ein are	true and that he or provided for in	
13	Maxim Yuri R. (Typed or printed name and capacity	abinovitch, President of person signing application					<u> </u>	
	Cabban at burning timing min arbonits.	,	•					

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, Socios Services US Inc., as a DOMESTIC CORPORATION (78 duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 05/28/2021, and is in good standing in this state.



Certificate Number: B202106081731868

You may verify this certificate online at <a href="http://www.nvsos.gov">http://www.nvsos.gov</a>

IN WITNESS WHEREOF, have hereunto set my hand and affixed the Great Seal of State, at my office on 06/08/2021.

BARBARA K CECAVSKE Secretary of State