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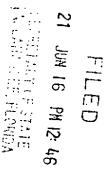
(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

Division of Corporations					
SUBJECT: QEST CONSULTING C	GROUP, INC.				
Name of corporation - must include suffix					
Dear Sir or Madam:					
The enclosed "Application by Foreig "Certificate of Existence," or "Certificate above referenced foreign corporation	cate of Good Stand	ling" and check are subm	Business in Florida," itted to register the		
Please return all correspondence conc	erning this matter	to the following:			
HERMANN BURCKHARDT					
	Name of F	erson			
QEST CONSULTING GROUP, INC.					
	Firm/Comp	bany			
1200 N FEDERAL HIGHWAY, SUITE	200				
	Addre	SS			
BOCA RATON, FLORIDA 33432					
	City/State an	d Zip code			
tmjcpa2005@yahoo.com					
E-mail add	ress: (to be used fo	r future annual report not	tification)		
For further information concerning th	s matter, please ca	11:			
HERMANN BURCKHARDT	at (<u></u>	809-2636			
Name of Person	Area Code	Daytime Telepho	ne Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following a Please make check payable to: FLORIDA \$70.00 Filing Fee \$78.75 F Certifica	DEPARTMENT (iling Fee &		 \$87.50 Filing Fee, Certificate of Status & Certified 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.

 (If name unavail 	able in Florida, enter alternate corporate name ado	opted for the purpose of transac	ting business in Florida)
		• •	ang outmost in Fiorial,
(State or count	ry under the law of which it is incorporated) 3.	(FEI number, if	applicable)
12/23/2013	5		
(Date	e of incorporation) 5	(Date of duration, if other	er than perpetual)
·			
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502.	orida, if prior to registration)	
4675 S YOSEMI	TE STREET, UNIT 204, DENVER CO 80237	r.s., to determine penanty had	amy)
-	(Principal office	street address)	
	(
-	(Current mailing a	ddress, if different)	
Name and street	et address of Florida registered agent: (P.O. B	lox NOT acceptable)	
		 ' '	
Name:	HERMANN BURCKHARDT		
	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200	- -	
	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200	- -	21
ffice Address:	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FLORIDA (City)	, Florida 33432 (Zip code)	21 = ==================================
ffice Address: Registered age	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FLORIDA (City) ent's acceptance:	, Florida 33432(Zip code)	21 1911
ffice Address: Registered ago	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FLORIDA (City) ent's acceptance; and as registered agent and to accept service of	, Florida $\frac{33432}{(Zip \ code)}$	ed corporation at the place
ffice Address: Registered ago aving been namesignated in this rther agree to co	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FLORIDA (City) ent's acceptance: eed as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relations.	, Florida 33432, Zip code) of process for the above state as registered agent and agive to the proper and comp.	ed corporation of the place
ffice Address: Registered ago aving been namesignated in this	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FLORIDA (City) ent's acceptance: red as registered agent and to accept service a application, I hereby accept the appointment	, Florida 33432, Zip code) of process for the above state as registered agent and agive to the proper and comp.	ed corporation of the place
ffice Address: Registered ago aving been nam signated in this rther agree to co	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FLORIDA (City) ent's acceptance: eed as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relations.	, Florida 33432, Zip code) of process for the above state as registered agent and agive to the proper and comp.	ed corporation of the place tree to act in this capacity lete performance of my di
ffice Address: Registered ago aving been namesignated in this	HERMANN BURCKHARDT 1200 N FEDERAL HIGHWAY, SUITE 200 BOCA RATON, FLORIDA (City) ent's acceptance: eed as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relations.	, Florida 33432, Zip code) of process for the above state as registered agent and agive to the proper and comp.	ed corporation of the pla tree to act in this capacity lete performance of my d

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
□Chairman	Name: THOMAS M JASPERS	Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director	SUITE 200	□Director					
□President	BOCA RATON, FLORIDA 33432	□President					
□Vice President		□Vice President					
Secretary	Treasurer	☐ Secretary		□Treasurer			
Other CFO	Other	□Other		□Other			
■ Chairman □ Vice Chairman ■ Director ■ President	Name: HERMANN BURCKHARDT Address: 11200 N FEDERAL HIGHWAY SUITE 200 BOCA RATON, FLORIDA 33432	□Chairman □Vice Chairman □Director □President	Address:				
		□ Vice President					
□Secretary CEO	☐ Treasurer	□Secretary		□Treasurer			
Other	Other	□Other		□Other			
□Chairman □Vice Chairman ■Director	Name: Guillermo Calvo Mahe Address: 1200 N FEDERAL HIGHWAY SUITE 200	□Chairman □Vice Chairman □Director					
□President	BOCA RATON, FLORIDA 33432	□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 Virector 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 s.817.155, F.S. 13. HERMANN BURCKHARDT, CHAIRMAN							

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.

QEST CONSULTING GROUP, INC.

is a

Corporation

formed or registered on 12/23/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131729117.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/30/2020 that have been posted, and by documents delivered to this office electronically through 09/02/2020 @ 08:52:16 .

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 09/02/2020 @ 08:52:16 in accordance with applicable law. This certificate is assigned Confirmation Number 12571670



Secretary of State of the State of Colorado

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.sos.state.co.us/biz/CertificateSearchCriteria.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.sos.state.co.us/ click "Businesses, trademarks, trade names" and select "Frequently Asked Questions,"