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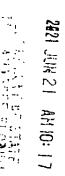
(Re	questor's Name)			
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JUN 29 2021 M. SOLONON

## **COVER LETTER**

TO:	Registration Section Division of Corporations
STID	IECT: Glasswing International USAyInc.
3013	Name of Corporation - must include suffix
Dear S	Sir or Madam:
Affair	nclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to er the above referenced not for profit corporation to conduct its affairs in Florida.
Plcase	return all correspondence concerning this matter to the following:
	Kathleen Venker
	Name of Person
	Nonprofit Service Group
	Firm/Company
	200 North Glebe Road
	Suite 315
	Address
	Arlington, VA 22203
	City/State and Zip Code
	kvenker@nonprofitserv.com
	E-mail address: (to be used for future annual report notification)
or fu	rther information concerning this matter, please call:
Kathle	cen Venker 703 528-7525
	Name of Person at ( Daytime Telephone Number
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303
Please	ied is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE  0.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$78.75 Filing Fee & \$\Bigcup \\$87.50 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

		and for the purpose of transacting business	es in Florida)	
(If name unavai	lable in Florida, enter alternate corpora	ate name adopted for the purpose of transacting business	33 (11 1 101100)	
Delaware		3, 26-1456470		
	try under the law of which it is incorpo			
09/17/2007	<u>,</u>	5. Perpetual		
(D	ate of Incorporation)	(Date of duration, if other than per	petuai)	
N/A		tion. See sections 617.1501 & 617.1502, F.S, to determin	e nevalty lightlity	, <b>)</b>
(Date first condu		tion. See sections 017.1301 & 017.1302, F.S, to determin	е ренану наопну	.,
199 Water Stre	et, Fl 34, New York, NY 10038			
	(Princ	cipal office street address)		
Same as Above				
Same as Moove				
	(Current	mailing address, it different)		
	(Current	mailing address, it different)		
nongrafit aresi	·		\merica	
nonprofit organ	·		America	2521
	nization that generates awareness and neorporation authorized in home state or	mobilizes resources for charitable purposes in Central /	America	<b>2621</b> JU
	·	mobilizes resources for charitable purposes in Central /	America	2621 JUH
. Name and str	nization that generates awareness and n corporation authorized in home state or eet address of Florida registered age	mobilizes resources for charitable purposes in Central /	America	<b>2621</b> JUH 21
. Name and str	nization that generates awareness and n corporation authorized in home state or eet address of Florida registered ago Matilde Siman	mobilizes resources for charitable purposes in Central /	America	2
. Name and str	nization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman	mobilizes resources for charitable purposes in Central / recountry to be carried out in the state of Florida) ent: (P.O. Box <u>NOT</u> acceptable)	1. 11. 11. 11. 11. 11. 11. 11. 11. 11.	2
. Name and <u>str</u> Name:	nization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman	mobilizes resources for charitable purposes in Central / recountry to be carried out in the state of Florida) ent: (P.O. Box <u>NOT</u> acceptable)	1	2621 JUH 21 AH 10:
. Name and str	nization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman	mobilizes resources for charitable purposes in Central /	1. 11. 11. 11. 11. 11. 11. 11. 11. 11.	2
. Name and <u>str</u> Name: Office Address:	mization that generates awareness and neorporation authorized in home state or eet address of Florida registered ago Matilde Siman  1425 Venetia Avenue  Coral Gables  (City)	mobilizes resources for charitable purposes in Central / recountry to be carried out in the state of Florida) ent: (P.O. Box <u>NOT</u> acceptable)	1. 11. 11. 11. 11. 11. 11. 11. 11. 11.	2
Name and strong Name:  Office Address:	mization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman  1425 Venetia Avenue  Coral Gables  (City)  1 agent's acceptance:	ent: (P.O. Box NOT acceptable) , Florida 33134  (Zip Code)	Table 1997	21 AH 10: 17 lace
Name and street Name:  Office Address:  10. Registered Javing been no	mization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman  1425 Venetia Avenue  Coral Gables  (City)  agent's acceptance:  umed as registered agent and to acceptance agent and to acceptance agent and to acceptance as registered agent and to acceptance.	ent: (P.O. Box NOT acceptable)  , Florida 33134  (Zip Code)  cept service of process for the above stated corpo	ration at the plant in this capaci	2
Name and street Name:  Office Address:  O. Registered Javing been not esignated in the	mization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman  1425 Venetia Avenue  Coral Gables  (City)  I agent's acceptance:  I agent'	mobilizes resources for charitable purposes in Central / recountry to be carried out in the state of Florida)  ent: (P.O. Box NOT acceptable) , Florida 33134  (Zip Code)  cept service of process for the above stated corpor appointment as registered agent and agree to acceptables relative to the proper and complete perfections.	ration at the plant in this capaci	2  hH   0:   7   lace   I
Name and street Name:  Office Address:  10. Registered Having been not lesignated in the	mization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman  1425 Venetia Avenue  Coral Gables  (City)  I agent's acceptance:  I agent'	mobilizes resources for charitable purposes in Central / recountry to be carried out in the state of Florida)  ent: (P.O. Box NOT acceptable) , Florida 33134  (Zip Code)  cept service of process for the above stated corpor appointment as registered agent and agree to acceptables relative to the proper and complete perfections.	ration at the plant in this capaci	2
Name and street Name:  Office Address:  10. Registered Having been not lesignated in the	mization that generates awareness and neorporation authorized in home state or eet address of Florida registered age Matilde Siman  1425 Venetia Avenue  Coral Gables  (City)  I agent's acceptance:  I agent'	ent: (P.O. Box NOT acceptable)  , Florida 33134  (Zip Code)  cept service of process for the above stated corpo	ration at the plant in this capaci	2  AH 10: 17 lace

11. 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.

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

A. DIRECTOR				
□ Chairman	Name:	Chairman	Name: John Moore	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	Fl 34	Director	FI 34	
□President	New York	□President	New York	
□Vice President	NY, 10038	□ Vice President	NY, 10038	
☐ Secretary	□Treasurer	□ Secretary	□Treasurer	
Other: Executiv	e Director □ Other:	□Other:	Other:	
□Chairman	Ken Baker Name:	□Chairman	Name: Roman Emiliano	
	199 Water Street		199 Water Street	
□Director	FI 34	[7][7s]	Fl 34	
□President	New York	☐ President	New York	
■Vice President	NY, 10038	☐Vice President	NY, 10038	
□Secretary	☐ Treasurer	☐ Secretary	□Treasurer : ·	
Other:	☐ Other:	Finance (	Chair Other.	
□ Chairman	Name:	□ Chairman	Beatriz Beltranena	
	199 Water Street		199 Water Stret	
Director	FI 34		Fl 34	
President	New York	□President	New York	
□Vice President	NY, 10038	□Vice President	NY, 10038	
☐Secretary	☐ Treasurer	☐ Secretary	□Treasurer	
□Other:	Other:	□Other:	Other:	
Non-indexed indiv	it Notice: Use an attachment to seport more the viduals may be added to the index when filing (Signature of Chairman, Vice Chairman, or	g your Florida Department o	of State Annual Report form.	
14	(Typed or printed name and canacit	v of person cianing applicati	ion)	

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "GLASSWING INTERNATIONAL USA, INC." 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 TWENTY-EIGHTH DAY OF APRIL,

A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

and some delaware grow and

Authentication: 203085036

Date: 04-28-21