(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



700370281757

2021 AUS -9 AM 9: 53 2021 AUG -9 PM 3: 00

RECEIVED

~ 1 11 2021 . Hier

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau

mmoreau@incserv.com

850.656.7953

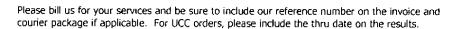
REQUEST DATE 8/9/2021

(**PRIORITY**) Routine

OUR REF # (Order ID#) Ashley

ORDER ENTITY: H.Y. INTERNATIONAL CORPORATION

PLEASE PERFORM THE FOLLOWING SERVICES:	
H.Y. INTERNATIONAL CORPORATION	
Please file the attached qualification.	
NOTES:	
\$70.00 Authorized	
Email address for annual report reminders: radiv@incserv.com	
RETURN/FORWARDING INSTRUCTIONS: ACCOUNT NUMBER: I20050000052	
Please bill the above referenced account for this order.	
If you have any questions please contact me at 656-7956,	
Sincerely,	



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 nar	ne adopte	d for the purpose of transacting bus	iness in Florida)
DELAWARE		3. 23-27	22762	
(State or counti	y under the law of which it is incorporated)		(FEI number, if applical	ole)
05/05/1993		5.		
(Date of incorporation)			(Date of duration, if other than perpetual)	
10132 COLVIN	NUN ROAD SHITE E GREAT FALLS V	7.1502, F.S A. 22066		
10132 COLVIN	RUN ROAD SUITE F GREAT FALLS, V. (Principal o	A 22066 office <u>stre</u>		2621
	(Principal o	A 22066 office <u>stre</u> iling addre	ess. if different)	2021 4110 -9
	(Principal o	A 22066 office <u>stre</u> iling addre	ess. if different)	19 2
Name and stree	(Principal of Current man the address of Florida registered agent: (Incorporating Services, Ltd.)	A 22066 office <u>stre</u> iling addre	ess. if different)	1.5
Name and stree	(Principal of Current ma t address of Florida registered agent: (Incorporating Services, Ltd.	A 22066 Diffice stre	ess. if different)	.6 1:11 8-

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.

ASHLEY WRIGHT - ASSISTANT SECRETARY

Dig tally signed by ASHLEY WRIGHT - ASSISTANT SECRETARY on INCORPORATING SERVICES LID. Out of mail LAMPS (LOCK) SERVICES LID. Out of mail LAMPS (LOCK) COVIDED (LOCK)

(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.

A. DIRECTORS HAWK YAZGAN □ Chairman Name: □ Chairman Name: _____ 10132 COLVIN RUN RD □Vice Chairman Address: □ Vice Chairman Address: __ SUITE F □Director □Director GREAT FALLS, VA 22066 President □President USA □Vice President ☐ Vice President □ Secretary □Treasurer ☐ Secretary ☐ Treasurer □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 □Other____ □Other _____ □Other____ □Other _____ □ Chairman Name: _____ Name: _____ ☐ Chairman □Vice Chairman Address: _____ □Vice Chairman Address: □Director □Director □ President ☐ President □Vice President _____ ☐ Vice President ☐ Secretary ☐ Treasurer □ Secretary ☐Treasurer □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. /S/ HAWK YAZGAN 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 s.817.155, F.S. HAWK YAZGAN (Typed or printed name and capacity of person signing application)

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "H.Y. INTERNATIONAL CORPORATION" 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 NINTH DAY OF AUGUST, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "H.Y.

INTERNATIONAL CORPORATION" WAS INCORPORATED ON THE FIFTH DAY OF

MAY, A.D. 1993.

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



Authentication: 203872751

Date: 08-09-21

2335380 8300 SR# 20212922971