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(Req	uestor's Name)		
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Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

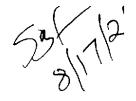
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COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT: Direct Truck	ting Corporation		
	Name of corporation	n - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence."	n by Foreign Corporation for "Certificate of Good State corporation to transact busing	nding" and check are subm	Business in Florida." itted to register the
Please return all correspon	ndence concerning this matte	r to the following:	
Sungwhan Kim			
	Name of	Person .	2021 AUG 13 PM
B.H. Whang and Associates	1 td		
17.11. Whang and Fissociates	Firm/Cor	npany	6
			. ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
1100 Hicks Road	Add	roce	
	Addi	1622	#:
Rolling Meadows, IL 60008			
	City/State	and Zip code	و
skim@bhwhang.com			
	E-mail address: (to be used	for future annual report no	otification)
For further information ed	oncerning this matter, please	call:	
Sungwhan Kim	at (847) 517-3696 ex.102	
Name of Person	Area Co	de Daytime Teleph	one Number
STREET/COUR Registration Sect Division of Corpo The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations Hahassee Street, Suite 810	MAILING AE Registration Se Division of Cor P.O. Box 6327 Tallahassee, FI	ction rporations
	to: FLORIDA DEPARTMEN	T OF STATE □ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee. Certificate 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.

	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
Spare Transport	Corporation		
(If name unavail	able in Florida, enter alternate corporate name ad	-	
Illinois	3.	36-4122654 (FEI number, if applicable)	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
January 3, 1997			
(Date	of incorporation)	(Date of duration, if other than perpetual)	
n/a			
7100 NW Gaines	(SEE SECTIONS 607.1501 & 607.1502 wille Road, Ocala Florida 34475	2, 1 .5., to determine penalty habitity (
	(Principal office	street address)	2021 1
	(Principal office	street address) address, if different)	2021 1/115
Name and street Name:	(Principal office	address, if different)	- 3 F8
	(Principal office (Current mailing a et address of Florida registered agent: (P.O.	address, if different)	$\frac{1}{\omega}$
Name:	(Principal office (Current mailing a set address of Florida registered agent: (P.O. 1) Edward Kim 5460 N. US Highway	address, if different)	- 3 F8

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.

(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	•			
□Chairman ·	Name: Edward Kim	□Chairman	Name:	Kuan Park
□Vice Chairman	Address: 5460 N. US Highway	□Vice Chairman	Address:	165 IL-Route 83, Stelos
	Ocala, FL 34475	□Director	Bensen	ville, IL 60/06
President		□President		
□Vice President		□ Vice President		
Secretary	□Treasurer	☐ Secretary		L'Treasurer
□Other	□Other	□Other		□Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary		□ Treasure L
□Other	Other	□Other		□ Other □ □
□Chairman	Name:	□Chairman	Name:	PR H
□Vice Chairman	Address:	□Vice Chairman	Address:	10
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		□Other
Important Notice: Undividuals may be	Use an attachment to report more than six (6). The atta added to the index when filing your Florida Reportme	ent of State Annual Re	d for report eport form.	ing purposes only. Non-indexed

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 14 above) affirms that the facts stated herein are true and that he or she is aware that talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.455, F.S.

File Number

5920-231-6



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

Business Services. I certify that

DIRECT TRUCKING CORPORATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 03, 1997, APPEARS TO HAVE. COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 12TH day of AUGUST A.D. 2021 .

Authentication #: 2122402744 verifiable until 08/12/2022

Authenticate at: http://www.ilsos.gov

Desse White

SECRETARY OF STATE