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OCT -5 2021 M. SOLOMON

COVER LETTER

	stration Section ion of Corporations			
SUBJECT:	FM WORLD GROUP USA	CORP		
SUBJECT.		of corporation -	must include suffix	
Dear Sir or M	ladam:			
"Certificate o	"Application by Foreign Co of Existence," or "Certificate need foreign corporation to t	of Good Stand	ing" and check are subm	
Please return	all correspondence concern	ing this matter t	o the following:	
GRZEGORZ	GUGALA			
		Name of P	erson	
GRZEGORZ	GUGALA CPA PC			
		Firm/Comp	pany	
157-17 WILL	ETS POINT BLVD			
		Addres	SS	
WHITESTON	NE, NY 11357			
		City/State an	d Zip code	
GUGALACP.	A@GMAIL.COM			
	E-mail addres	s: (to be used fo	or future annual report no	otification)
For further in	nformation concerning this r	natter, please ca	ıll:	
GREGORY C	GUGALA	at (917 302-9823 Area Code Daytime Telephone Number		
Nan	ne of Person	Area Code	Daytime Teleph	one 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		
	a check for the following am theck payable to: FLORIDA E ling Fee	DEPARTMENT ng Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	\$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.

FM WORLD G	ROUP FLORIDA CORP		
(If name unavail:	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Flo	orida)
2. DELAWARE		35-2703171 (FEI number, if applicable)	
	y under the law of which it is incorporated)	(FEI number, if applicable)	
4. 01/19/2021	5		
(Date	of incorporation)	(Date of duration, if other than perpetual)	
6. JANUARY 1, 2	2022		
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7. 2750 SW 145th A	(ve suite 301,Miriam , FL 33027		
	(Principal off	ice <u>street</u> address)	
			
	(Current mailir	ng address, if different)	. 2
8 Name and stree	et address of Florida registered agent: (P.C) Box NOT acceptable)	₹ <u>₹</u>
	INCOPORATING SERVICES, LTD., I	, , .	<u> </u>
Name:		· · · · · · · · · · · · · · · · · · ·	流流
Office Address:	1540 GLENWAY DRIVE		
	TALLAHASSE	, Florida	
	(City)	(Zip code)	26 Z
designated in this further agree to c	ed as registered agent and to accept servi application, I hereby accept the appoint	ice of process for the above stated corporation a nent as registered agent and agree to act in this relative to the proper and complete performance sition as registered agent.	capacity. I

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.

DocuSign Envelopé ID: 5B874454-AB9D-40F9-A9BA-D805EC62A420 A. DIRECTORS MAREK KRETEK Name: □Chairman □ Chairman 2750 SW 145th Ave suite 301 ☐ Vice Chairman Address: □Vice Chairman Address: Miriam, FL 33027 ☐ Director □Director President □ President □Vice President ☐ Vice President □ Secretary ☐ Treasurer ☐ Secretary ☐Treasurer Other _____ Other _____ □Other _____ □ Chairman □Chairman Name: _____ 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: _____ Chairman Name: __ _ _ ___ □Vice Chairman Address: Address: ____ ☐ Vice Chairman □ Director □ Director □President □ President □Vice President ☐ Vice President □Treasurer ☐ Secretary ☐ 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.

March Entek --- E1FCE0188073464

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.

		MAREK	KREI	ΈK.	PRE	SIDEN	П
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Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "FM WORLD GROUP USA CORP" 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 THIRTIETH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FM WORLD GROUP USA CORP" WAS INCORPORATED ON THE NINETEENTH DAY OF JANUARY, A.D. 2021.

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



Authentication: 204042618

Date: 08-30-21

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