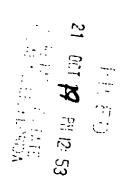
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PICK-UP WAIT MAIL				
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(Business Entity Name)				
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Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				

Office Use Only



09/21/21--01029--027 **250.00



May 1

COVER LETTER

	stration Section sion of Corporations			
SUBJECT:	Empyreal Realty Inc.			
	Nan	ne of corporation -	must include suffix	
Dear Sir or M	ladam:			
"Certificate of	"Application by Foreign of Existence," or "Certific need foreign corporation to	ate of Good Standi	ng" and check are submit	
Please return	all correspondence conce	ming this matter to	the following:	
Igor Buzhaker				
		Name of Pe	erson	
Empyreal Rea	lty Inc.			
		Firm/Comp	any	
1504 Bay Roa	d. Ste 1708			
		Addres	\$	
Miami Beach,	Florida 33139			
		City/State and	I Zip code	
jeff@homesol				
	E-mail addr	ess: (to be used for	future annual report noti	fication)
For further in	formation concerning this	s matter, please cal	1:	
lgor Buzhaker		at (8(14-5775	
Nan	ne of Person	Area Code	Daytime Telephon	ie Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sect Division of Corpo P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a Please make c □ \$70.00 Fi		DEPARTMENT (iling Fee &		S87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2021

IGOR BUZHAKER 1274 FULTON ST 3 FL BROOKLYN, NY 11216

SUBJECT: EMPYREAL REALTY INC.

Ref. Number: W21000128767

We have received your document for EMPYREAL REALTY INC. and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filir, g will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 921A00023194

RECEIVED

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.

Empyreal Realt	y Inc.		
(Enter name of c	orporation; must include "INCORPORATED lorp," "Inc." "Co," or "Corp.")	," "COMPANY," "CORPORATI	ON,"
SB Empyreal R	ealty Inc.		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transac	ting business in Florida)
2. New York	3	82-4293407	
	ry under the law of which it is incorporated)	(FEI number, if applicable)	
4. 02/18/2018	5.	Perpetual	
(Date	(Date of incorporation) (Date of duration, if c		er than perpetual)
6. No Prior Busine	ss Established (New Registration)		
·	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502, F.S., to determine penalty lial	pility)
7, 1274 Fulton Stree	et, 3rd Floor, Brooklyn, New York 11216		
	(Principal of	fice <u>street</u> address)	-
1274 Fulton Street, 3rd FLoor, Brooklyn, New York 11216			21
	(Current maili	ng address, if different)	80 -
8. Name and street	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	5 m
Name:	lgor Buzhaker		M 12: 53
Office Address:	1504 Bay Road, Ste 1708		전 전 기 년 기 년 기 년 기 년 기 년 기 년 기 년 기 년 기 년 기 년
	Miami Beach	, Florida <u>33139</u>	
	(City)	(Zip code)	

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 Igor Buzhaker Name: _____ Name: □Chairman **i** Chairman 1504 Bay Road. Ste 1708 □Vice Chainnan Address: Address: _____ ☐ Vice Chairman Miami Beach, Florida 33139. □ Director □ Director □President [] President □ Vice President ☐ Vice President ☐ Treasurer □ Secretary □Treasurer □ Secretary □Other ____ □ ElOther ______ []Other_____ □Other ____ Name; _____ Name: _____ □Chairman □Chairman Address: ☐ Vice Chairman □Vice Chairman Address: ______ □ Director □ Director □ President □President ☐ Vice President □ Vice President _ □Treasurer □ Secretary □ Treasurer □ Secretary □Other ___ □Other ____ ☐Other _____ □Other ____ □Chairman □Chairman Name: _____ Name: □ Vice Chairman Address: ______ ☐ Vice Chairman Address: □ Director □Director []President □President □Vice President □ Vice President _ □Treasurer ☐ Secretary □Treasurer □Secretary □Other _____ []Other_____ □Other_____ []Other Important Notice: Lee 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 tiling your Florida Department of State Annual Report form. 12. 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.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

1, ROSSANA ROSADO. Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: EMPYREAL REALTY INC

DOS 1D Number: 5278495

Entity Type: DOMESTIC BENEFIT CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 02/01/2018

Statement Status: PAST DUE DATE

Statement Due Date: 02/29/2020

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on September 10, 2021 at 02:16 P.M.

ROSSANA ROSADO, Secretary of State

Brandon C Hydra

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100000343369 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov