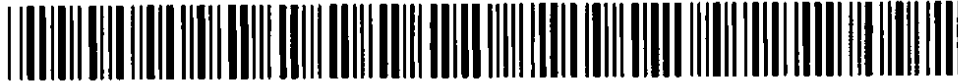


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Division of Corporations  
Florida Department of State  
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Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : 120180000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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## FOREIGN PROFIT/NONPROFIT CORPORATION

### Wattum Management Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2022 JAN -4 PM 1:03

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Corporate Filing Menu

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S. HAWKES

JAN - 2021

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**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.*

1. WATTUM MANAGEMENT INC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Wyoming 3. 84-2480438  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/23/2019 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 200 South Biscayne Boulevard, 20th Floor, Miami, FL, 33131  
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Law Office of Christian Fong, P.A.  
Office Address: 237 S Dixie Highway, 4th Floor Suite 467  
Coral Gables, Florida 33133  
(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.

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

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**A. DIRECTORS**

☐ Chairman Name: Arseniy Grusha  
☐ Vice Chairman Address: \_\_\_\_\_  
☒ Director 34 N FRANKLIN AVE # 687, box 1446  
☒ President PINEDALE, WY, 82941  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other CEO ☐ Other \_\_\_\_\_

☐ Chairman Name: Oleg Gorshkov  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director 34 N FRANKLIN AVE # 687, box 1446  
☐ President PINEDALE, WY, 82941  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_


☐ Chairman Name: Igor Soshkin  
☐ Vice Chairman Address: \_\_\_\_\_  
☒ Director 34 N FRANKLIN AVE # 687, box 1446  
☐ President PINEDALE, WY, 82941  
☒ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☒ Other CO-CEO ☐ Other \_\_\_\_\_

☐ Chairman Name: Christian Fong  
☐ Vice Chairman Address: 237 S Dixie Highway  
☐ Director 4th Floor, Suite 467  
☐ President Coral Gables, FL 33133  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ 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.

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.

13. Igor Soshkin, Director  
 (Typed or printed name and capacity of person signing application)

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**STATE OF WYOMING**  
**Office of the Secretary of State**

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I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

**WATTUM MANAGEMENT INC**

is a  
**Profit Corporation**

formed or qualified under the laws of Wyoming did on **July 23, 2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2019-000867325**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 22nd day of December, 2021 at 6:40 AM. This certificate is assigned ID Number 048777336.



*Edward A. Buchanan*  
Secretary of State

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