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To:

Division of Corporations

Fax Number : (850)617-6383

F'rom:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353 Phone : (800)221-2972 : (917)243-5843 Fax Number

**Enter the email address for this business entity to be used for this

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Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION GAVRILOVIC LOGISTICS INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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.

(II name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of tomsacting busin	ness in Florida)
New York	3.	82-4878954	
(State or country 03/21/2018	under the law of which it is incorporated)	(FEI mumber, if applicabl	e)
		(Date of duration, if other than pe	
(Date 01/20/2022	of incorporation)	tizate of duration, it other than po	стрениат)
	Apt 1606 Aventura, FL 33180	502, F.S., to determine penalty liability) pal office address)	
3300 NE 192nd S	St Apt 1606 Aventura, FL 33180	par office models,	
Name and stree	(Curtent maili t address of Florida registered agent: (P. NIKOLA GAVRILOVIC	ng address, if different) O. Box <u>NOT</u> acceptable)	SECRETARY OF ALLAHASSEE.
Mice Address:	3300 NE 192nd St Apt 1606		PM 12: 30 OF STATE
	Aventura, FL 33180	33180 , Florida	: 30 ATE

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. Names and business addresses of officers and/or directors:

	NIKOLA GAVRILOVIC
Chairman	3300 NE 192nd St Apt 1606 Aventura, FL 33180
Address:	
Vice Chai	man:
Address;	
Director	
Address:	
Director:	
Address:	
B. OFF	ICERS NIKOLA GAVRILOVIC
President	
Address:	3300 NE 192nd St Apt 1606 Aventura, FL 33180
Vice Pres	ident:
Address:	
Secretary	
Address:	
Treasur e r	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
	Signature of Director or Officer
are traces	cer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes egree felony as provided for in s.817.155, F.S.
NIK	OLA GAVRILOVIC-PRESIDENT
13	(Typed or printed name and capacity of person signing application)

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Acting 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:

GAVRILOVIC LOGISTICS INC

DOS ID Number:

5308541

Entity Type:

DOMESTIC BUSINESS CORPORATION

Entity Status:

EXISTING

Date of Initial Filing with DOS:

03/21/2018

Statement Status:

CURRENT

Statement Due Date:

03/31/2024

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type:

CERTIFICATE OF INCORPORATION

Date of Filing:

03/21/2018

Entity Name:

GAVRILOVIC LOGISTICS INC

Document Type:

BIENNIAL STATEMENT

Date of Filing:

01/12/2022

Above space is left blank intentionally.

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



WITNESS my hand and official scal of the Department of State, at the City of Albany, on January 13, 2022 at 06:49 A.M.

ROBERT J. RODRIGUEZ, Acting Secretary of State

Brandon C Heyles

By Brendan C. Hughes Executive Deputy Secretary of State

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