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## FOREIGN PROFIT/NONPROFIT CORPORATION

**NXFIVE Inc.** 

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Electronic Filing Menu Corporate Filing Menu

From: Robert Evert

H220000413163

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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1303, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

		iopted for the purpose of transacting business in Florida)	
Delaware	y under the law of which it is incorporated) 3.	<u>N/A</u>	
(State of countr	conder the law of which it is incorporated)	(FEI mumber, if applicable)	
5/25/2021	5	Perpetual	•
(Date of incorporation)		(Date of duration, if other than perpetual)	
Upon Qualific			-
<del></del>	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150)	lorida, if prior to registration)  2. F.S., to determine penalty liability)	
1688 Mecidian	Avenue Suite 420, Miami Beach, Florida 3313	9	
	(Principal office	street address)	
	(Current mailing	address, if different)	
Name and <u>street</u>	(Current mailing i address of Florida registered agent: (P.O. Business Filings Incorporated	address, if different)	15:21
Name:	indhess of Florida registered agent: (P.O.	address, if different)	1-8-429
Name:	Husiness Filings Incorporated  1200 South Pine Island Road	address, if different)  Box NOT acceptable)	
Name:	Husiness Filings Incorporated  1200 South Pine Island Road	address, if different)  Box NOT acceptable)	
Name: Tice Address:	Husiness Filings Incorporated  1200 South Pine Island Road  Plantation  (City)	address, if different)  Box NOT acceptable)	621-3-1 PH 4:1
Name: Tice Address: Registered age	Husiness Filings Incorporated  1200 South Pine Island Road  Plantation  (City)  nt's acceptance: acceptance:	Box NOT acceptable)  Box NOT acceptable)  Florida 33324  (Zip code)  of process for the above stated corporational the page 1500 process.	- 1 PH 4: 000
Name:  Hice Address:  Registered age aving been name exignated in this in the agree to contain the surface surface to contain the surface su	Husiness of Florida registered agent: (P.O.  Business Filings Incorporated  1200 South Pine Island Road  Plantation  (City)  nt's acceptance: acceptance: acceptance agent and to accept service appointment appointment.	Box NOT acceptable)  Florida 33324  (Zip code)  of process for the above stated corporational the fact as registered agent and agree to act in this capacitive to the proper and complete performance of m	PH 4: Office city. 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.

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

## H220000413163

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A. DIRECTORS		-				
□Chairman	Name: Martin Gravel	[Chairman Name:				
□Vice Chamman	Address:	□Vice Chairman Address:				
<b>X</b> Director ⋅	1688 Meridian Avenue Suite 420	C Director				
l <b>X</b> President	Miami Beach, Florida 33139	☐President				
□Vice President		□Vice President				
□Secretary .	[]Treasurer	□ Secretary	🖰 Freasurer			
[]Other		COrlier	□Other			
□Chaiman	Name:	□Chairman Same:				
□Vice Chairman	Address:	☐(Vice Chainnan Address)				
□ Director		□Director .				
□President		[]President				
□Vice Presidem		CiVice President	· -			
□ Secretary	. Treaswor	☐Secretary	□Тгеязлег			
□Other	□Orber	□Other	□Othet			
	·	□Chairman Name:				
	Name:					
	Address:	DVice Chainnan Address:				
□Director		·				
□President		[]President				
□Vice President		□Vice President				
□ Secretary	□Treasurer	□ Secietary .	☐Treasurer			
□Other	Other	[]Other	[]Other			
individuals may be	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Department	m of 20life Antinat Report form.	•			
12.	Markin Grau	<u>/c/</u>				
,	Markin Gras	r Officer	•			
The officer or director signing this document (and who is listed in number 11 above) affums that the facts stated herein are true and that he of she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 5.817.155. F.S.						
13. Martin Gravel, President  (Typed or minted name and capacity of person signing application)						
	(Travel or mintal name and canacity of perso	a signing replication)				

To: +18506176383



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

DELAWARE, DO HEREBY CERTIFY "NXFIVE INC." 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 THIRTY-FIRST DAY OF JANUARY, A.D. 2022.

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

at corp delaware gov/auth

Authentication: 202535875

Date: 01-31-22