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Division of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION Bulltick4U, Inc.

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S. FRANKLIN

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

From: Lexus Wingo

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.

(Enter name of co	rporation; must include "INCORPORAT rrp," "Inc," "Co," or "Corp.")	red," "Compan	Y," "CORPORATIO!	N,"
(If name unavaila	ble in Florida, enter alternate corporate n	name adopted for th	e purpose of transactir	ng business in Florida)
Delaware		3.		
(State or country	y under the law of which it is incorporate	d)	(FEI number, if ap	oplicable)
12/21/2021		5		
(Date	of incorporation)	(Da	te of duration, if other	than perpetual)
	(Date first transacted busin (SEE SECTIONS 607,1501 & 6			ity)
333 SE 2nd Aven	ue, Suite 3950, Miami, FL 33131			
	(Principa	al office <u>street</u> adda	ress)	
				2022
	(Current r	mailing address, if o	different)	HAR
Name and stree	t address of Florida registered agent:	(P.O. Box NOT	<u>[acceptable]</u>	ω
Name:	C T Corporation System			
ffice Address:	1200 South Pine Island Road			3 AH 12: 14
	Plantation	FL	33324	
	(City)	·	(Zip code)	
	ent's accentance:			
Registered and	ed as registered agent and to accept	service of proces	s for the above state	ed corporation at the p
aving been nam		ointment as regi:	stered agent and agr	ree to act in this capac
aving been nam signated in this	application, I hereby accept the app	ites relative to th	e proper and comple	ue periormance of m
aving been namesignated in this orther agree to c	application, I hereby accept the app omply with the provisions of all state with and accept the obligations of n	ates relative to the	e proper and comple	gte perjormance of my
esignated in this orther agree to c	amply with the provisions of all state	ates relative to the	e proper and comple gistered agent.	ste performance of my

^{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]:

From: Lexus Wingo

A. DIRECTORS William A. Herrera Humberto Banuelos □ Chairman □ Chaseman 333 SE 2nd Avenue 333 SE 2nd Avenue Address □Vice Chairman Address. □Vice Chairman Suite 3950. Suite 3950 □Director □Director Miami, FL 33131 Miami, FL 33131 □President President **™**Vice President □Vice President Treasurer ElSecretary ☐Treasurer □Secretary □ Other _____ ☐ Other _____ □()ther _____ □ Other ______ Name. Adolfo del Cueto Name. □ Chairman □ Chairman Address: ____ 333 SE 2nd Avenue Address: __ □Vice Chairman □ Vice Chairman Suite 3950 Suite 3950 □Director Director Miami, FL 33131 Miami, FL 33131 □ President □President ■ Vice President Vice President ∃Treasurer ☐ Secretary ☐Treasurer ☐Secretary □Other_____ Other ______ □ Other _____ Juan Rojas Name: _ Genemarie Equilior □ Chairman □ Chairman 333 SE 2nd Avenue □Vice Chairman Address: Address: □Vice Chairman Suite 3950 Suite 3950 $\overline{\sim}$ □ Director □Director Miami, FL 33131 Miami, FL 33131 ∐President "Il resident □ Vice President Treasurer ...Treasurer [] Secretary ☐ Secretary □Other _____ □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 Pepartient of State Annual Report form. 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

(Typed or printed name and capacity of person signing application)

s 817.155, F.S.

Juan Rojas

To: +18506176383

Page; 5 of 5

Delaware The First State

Page 1

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

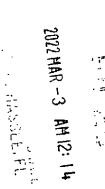
DELAWARE, DO HEREBY CERTIFY "BULLTICK4U, INC" IS DULY INCORPORATED

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 TWENTY-SECOND DAY OF FEBRUARY, A.D. 2022.

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



Authentication: 202733093

Date: 02-22-22

6490175 8300 SR# 20220643933

You may verify this certificate online at corp.delaware.gov/authver.shtml