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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. FRANKLIN MAR 1 0 2022

COVER LETTER

	stration Section sion of Corporations					
SUBJECT:	Tradepal, Inc.					
		Name of corpora	ition - mus	t include suffix		
Dear Sir or M	ładam:					
"Certificate of	"Application by Fore of Existence," or "Cert need foreign corporation	ificate of Good	Standing"	and check are sub		
Please return	all correspondence co	ncerning this ma	atter to the	following:		
			Guesso			
		Name	e of Persor	1		
		Trade	epal, Inc.		·	20
		Firm/	Company		. '	17 F1
		360 NW	27th Str	eet		- 23
		A	ddress			0
		Miam	ii, FL 331	27	••	. PH .
		City/Sta	ite and Zip	code	• 17	PH 8: 01
		karim.guess	-		د. پا	<u> </u>
	E-mail a	ddress: (to be us	sed for futi	are annual report r	notification)	
For further in	nformation concerning	this matter, plea	ise call:			
Karim Gue	essous	at (1)	415-508	-7614	
Nam	ne of Person	Area	Code	Daytime Telep	hone Number	_
Regis Divis The C 2415	EET/COURIER AD stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Su thassee, FL 32303			MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	
	~		□ \$78.	TATE 75 Filing Fee & itied Copy	S87.50 Fill Certificate Certified C	of Status &

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.

Tradepal, Inc		<u></u>		
	orporation: must include "INCORPORATED," " orp." "Inc." "Co." or "Corp.")	COMPANY." "CORPORATION	."	
(If name unavails	able in Florida, enter alternate corporate name ado	opted for the purpose of transacting	business in Florida)	
Delaware	3. 26-4334707			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
2/9/2009	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in Fl			
	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability	y)	
360 NW 27th	Street, Miami, FL 33127			
	(Principal office	street address)		
	(Current mailing a	ddress. if different)		
Name and stree	et address of Florida registered agent: (P.O. I	Roy NOT acceptable)	25	
rame and <u>street</u>	<u> </u>	70.1 1101 acceptable))22 F	
Name:	Karim Guessous	<u> </u>	83:	
ffice Address:	360 NW 27th Street	_	2022 FEB 10 PH 8: 07	
	Miami	Florida <u>33127</u>	PH	
	(City)	(Zip code)	ø	
Registered age	ent's acceptance:		2. 9	

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.

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 Name: Karim Guessous Name: □Chairman □ Chairman Address: 360 NW 27th Street, Miami Address: _____ □Vice Chairman □ Vice Chairman FL 33127 □ Director □ Director President ☐ President □ Vice President ☐ Vice President □ Secretary □Treasurer ☐ Treasurer □ Secretary □Other CEO □Other _____ □Other _____ ☐Other ____ Name: Name: □ Chairman ☐ Chairman Address: ____ □Vice Chairman Address: □ Vice Chairman □ Director □ Director □President □ President ☐ Vice President □ Vice President □ Secretary ☐ Treasurer ☐ Secretary □ Treasurer □Other ____ □Other _____ □Other _____ ☐ Other ____ Name: _____ □ Chairman ☐ Chairman Name: □Vice Chairman Address: ☐ Vice Chairman Address: ___ □ Director □ Director □ President □President □ Vice President □Vice President □ Secretary ☐ Treasurer □ Secretary □Treasurer □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 Department of State Annual Report form. renur

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.

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRADEPAL, 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-SIXTH DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRADEPAL, INC." WAS INCORPORATED ON THE NINTH DAY OF FEBRUARY, A.D. 2009.



4656131 8300

SR# 20214067287

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

Authentication: 202492204

Date: 01-26-22