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SECRETARY OF STATE
FALL AHASSEE, FLORIDA

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COVER LETTER

TO:		tration Sec on of Coп			
SUBJ	ECT:	SHARK F	REIGHT, INC.		
0000			Name of	corporation	ı - must include suffix
Dear S	ir or M	adam:			
"Certif	icate of	Existence	on by Foreign Corp ;" or "Certificate on a corporation to tran	f Good Stan	Authorization to Transact Business in Florida," nding" and check are submitted to register the ess in Florida.
Please	return a	all correspo	ondence concerning	g this matter	r to the following:
Maria	Jose G	ranados-G	odoy		
			·	Name of	Person
Simply	Legal				
				Firm/Com	apany
20200	W. Dix	ie Hwy, Su	iite G17		
		-		Addro	css
Aventu	ıra, FL,	33180			
				City/State a	and Zip code
mj@si	mplylge	algroup.co	om		
			E-mail address: (to be used f	for future annual report notification)
For fur	ther inf	ormation o	concerning this mat	ter, please c	eall:
Maria Jose Granados Godoy		305	8586208		
	Name	of Person		Area Code	e Daytime Telephone Number
	Regist Divisi The C 2415 N	ration Sec on of Corp entre of Ta	oorations allahassee Street, Suite 810		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
	nake cho	ck payable	to: FLORIDA DEP \$78.75 Filing Certificate of	ARTMENT Fee & □	OF STATE 3 \$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

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.

(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	•	
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)		
2. Illinois	3	475547021		
	y under the law of which it is incorporated)	(FEI number, if applicable)	-	
11/09/2015 4.	5.			
·· 	of incorporation)	(Date of duration, if other than perpetual)		
	(SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7. 1030 S LaGrand	ge rd, #20, LAgrange, IL 60525			
	(Principal off	fice street address)		
8. Name and stree Name:	t address of Florida registered agent: (P.0 Maria Jose Granados Godoy	O. Box NOT acceptable)	9822 HA	
Office Address:	20200 W. Dixie Hwy, Suite G17		70 ± 1 ;	
	Aventura	, Florida		
	(City)	(Zip code)	3	
9. Registered age Having been nam	ed as registered agent and to accept servi application, I hereby accept the appoints	nice of process for the above stated corporation af the p ment as registered agent and agree to act in this capac relative to the proper and complete performance of my	city. 1	

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

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS Uros Kljajevic Aleksandar Pejcic □ Chairman □Chairman 333 NE 24th ST 350 S Miami Av, ☐ Vice Chairman Address: □ Vice Chairman Address: Miami, FL 33137 Miami, FL 33130 □Director □ Director □President President ■Vice President □Vice President □ Secretary □ Treasurer ☐Secretary □Treasurer □Other _____ □Other _____ □Other _ □Other _____ □Chairman Name: _____ Name: _____ □Chairman □Vice Chairman Address: □Vice Chairman Address: ____ Director □ Director □President □President □Vice President ☐ Vice President ☐ Secretary □Treasurer □Secretary ☐ Treasurer □Other ___ □Other _____ Other _____ Other □ Chairman Name; _____ □Chairman Name: _____ □Vice Chairman Address: _____ □Vice Chairman Address: _____ □ Director □ Director □ President □President □Vice President □Vice President □ Secretary □Treasurer □ Secretary ☐Treasurer □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. 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. Aleksander Peicic, President

File Number

7040-545-8



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

SHARK FREIGHT, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 09, 2015, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of

the State of Illinois, this **22ND**

day of FEBRUARY A.D.

Authentication #: 2205304586 verifiable until 02/22/2023

Authenticate at: http://www.ilsos.gov

SECRETARY OF STATE