F2200000235

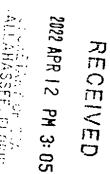
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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T. LEMIEUX APR 1 3 2022

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051 FROM

Melissa Moreau mmoreau@incserv.com

850.656.7953

REQUEST DATE 4/11/2022

PRIORITY Regular Approval

OUR REF # (Order ID#) 1025164

ORDER ENTITY_____SAMARO HOLDINGS INC.

PLEASE PERFORM THE FOLLOWING SERVICES:	
SAMARO HOLDINGS INC. (FL)	
New corp filing	

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NOTE:	c.					ſ
	J	 	 	 	 	1

\$70.00 Authorized
Email address for annual report reminders: corp2@servico.com

RETURN/FORWARDING INSTRUCTIONS:

Please bill the above referenced account for this order.

ACCOUNT NUMBER: 120050000052

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, April 11, 2022 Page 1 of 1

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.

(11 Banic unavan	able in Florida, enter alternate corporate name a	dopted for the purpose of transacti	ing business in Florida)			
New York	3	46-2484146				
	y under the law of which it is incorporated)	(FEI number, if a	ipplicable)			
04/02/2013	of incorporation) 5.	(Date of duration, if other	r than pernetural)			
naci)	of meorganation)	(17ate of duration, if other	than perpetually			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 02, F.S., to determine penalty liabi	lity)			
1688 MERIDIAI	S AVE, STE 700, MIAMI BEACH, FL 33139					
	(Principal offic	e <u>street</u> address)				
	(Current mailing	address, if different)	g.,			
	·		2022 APR 12			
Name and stre	et address of Florida registered agent: (P.O	. Box NOT acceptable)	APR			
Name:	Corporate Service Bureau Inc.		RILED RIZ P RASSEE			
fice Address:	1540 Glenway Drive		mg 72 C			
	Tallahassee	. Florida 32301	PM 1:47 FOF STATE SEE, FLORIDA			
	(City)	(Zip code)				
Registered ag	ent's acceptance:	e of process for the above state				
wing been nan	ent's acceptance: ned as registered agent and to accept service					
ving been nan signated in this		ent as registered agent and ag				

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]:

A. DIRECTORS ROBERT G. REVERA □ Chairman □Chairman Name: _____ 1688 MERIDIAN AVE □Vice Chairman □ Vice Chairman Address: Address: ______ STE 700 □ Director □Director MIAMI BEACH, FL 33139 President □President ☐ Vice President □ Vice President □ Secretary □Treasurer □Treasurer □ Secretary □Other_____ □Other _____ Name: Name: □ Chairman □ 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 □ Secretary ☐ Treasurer ☐ 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. Robert G. Revera 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.

, ROBERT G. REVERA, PRESIDENT

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, 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: SAMARO HOLDINGS INC.

DOS ID Number: 4382428

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 04/02/2013
Statement Status: CURRENT

Statement Status: CURRENT Statement Due Date: 04/30/2023

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: 04/02/2013

Entity Name: SAMARO HOLDINGS INC.

Document Type: BIENNIAL STATEMENT

Date of Filing: 01/28/2021 **Effective Date:** 04/01/2019

Document Type: BIENNIAL STATEMENT

Date of Filing: 04/07/2022 **Effective Date:** 04/01/2021

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 seal of the Department of State, at the City of Albany, on April 11, 2022 at 01:40 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Higher

By Brendan C. Hughes
Executive Deputy Secretary of State

Authentication Number: 100001379132 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov

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