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S. FRANKLIN MAY 0 7 2022

COVER LETTER

то:	Registration Secti Division of Corpo					
SUBJ	JECT:	181	O Projects	inc.	-	
	·	Name o	Corporation - mu	st include suffix	• .	
Dear S	Sir or Madam:					
"Certi	nclosed "Application ficate of Existence," referenced foreign of	or "Certificate	of Good Standing	and check are sub	et Business in Florida, mitted to register the	••
Please	return all correspor	idence concernit	ng this matter to th	e following:		
		Josen	Yn Rome	RO		
-			Name of Perso	·II	707	
		180	Projects	Inc.	2022 HAD	? <u>;</u>
			Firm/Company			ج— در در
	1533	9 Bow	mans Fo	lly Dr.	_	
			Address		1,-	<u> </u>
		Mana	assas, VA	20112		PH 2: 5
			City/State and Zi	p code		-
	id	projects	inc@gm	nail. com		
		E-mail address:	(to be used for fu	ture annual report i	iotification)	
For fu	rther information co	ncerning this ma	atter, please call:			
Jo	ocelyn Ror	nero	703	861-308	84	
	Name of Person		Area Code	Daytime Telep	hone Number	
	STREET/COUR Registration Secti Division of Corpe The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	on rations lahassee Street, Suite 810	S:	MAILING A Registration S Division of Co P.O. Box 632 Tallahassec, F	ection orporations 7	
Please	sed is a check for the make check payable t 0.00 Filing Fee		PARTMENT OF S Fee & \$ \Boxed\$ \$78	STATE .75 Filing Fee & tified Copy	S87.50 Filing For Certificate of St 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.

1.		Projects				
	orporation; must include "INC orp," "Inc," "Co," or "Corp.")	ORPORATED." "C	OMPANY," "CORPORATION,"			
			0 10 1-			
	181) Heating	8 A/C Inc. ed for the purpose of transacting but			
					ida)	
Ctata or countr	Virginia	incorporated)	(FEI number, if applica			
4(Date	of incorporation)	5	(Date of duration, if other than	perpetual)		
6.						
· · ·			ida, if prior to registration) (S., to determine penalty liability)			
- 1522			Manassas, VA 20	0112		
/	,	(Principal office st	reet address)			
					20	
		(Current mailing add	lress, if different)		20/2 KAY -3	77)
O. Nimma and design			v NOT and makin		二 (== ==
	et address of Florida registe Ana Navarr	-	x inor acceptance)			
Name:					PH 2:	٠. ٠
Office Address:	1303 Autum			·.	رب ابن	
	Tampa		, Florida <u>33613</u> (Zip code)		•••	
	(City)		(Zip code)			
	ent's acceptance:					
			process for the above stated column as registered agent and agree to			
further agree to c	comply with the provisions or with and accept the oblige	of all statutes relati	ve to the proper and complete pe	erformance :	of my di	uties,
ana ram jamiila	г <i>мин ана ассери те об</i> ида	mous of my positio	i us regisiereu ugeni.			
	A 11					
_	Ana Nau			-		
	(Reg	fistered agent's signat	ire)			

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	^				
□ Chairman	Name: Joselyn Romero	∐Chairman	Name:		
	Address: 15339 Bowmans	□Vice Chamuan	Address:		
□Director	Folly Dr. Manassas,	□Director			
Liveresident	VA 20112	I IPresident			
□Vice President		□Vice President			
□ Secretary	☐Treasurer	☐ Secretary		□Treasurer	
[3Other	[]Other	[]Other	 	[POther	
□Chainnan	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			202
□ Secretary	□Treasurer	☐ Secretary		□Treasurer	
□Other	□Other	□Other		⊡Other	
					구.
□Chairman	Name:	□Chairman	Name:		<u>. 5.</u>
□Vice Chairman	Address:	□Vice Chairman	Address:	-	
□Director		Director		-	
∐President		LIPresident			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer	
[]Other		ElOther		LIOther	
individuals may b	Use an attachment to report more than six (6). The attachment to department added to the index when filing your Florida Departm	ent of State Annual R	teport form.	purposes only, N	lon-indexed
12	Signature of Director	90			
	Signature of Director	or Officer	along along Const. Top	en d'houmalin aren tenn	o and that he or
The officer or dire she is aware that t s.817.155, F.S.	ector signing this document (and who is listed in number false information submitted in a document to the Depar	iment of State constit	tutes a third degr	ree felony as prov	rided for in
13	Tocelyn Ro (Typed or printed name and capacity of pers	mero			
	(Typed or printed name and capacity of per-	son signing applicatio	n)		

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That I & D PROJECTS INC. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on July 24, 2017;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealt Fof Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

March 15, 2022

Bernard J. Logan, Clerk of the Commission

CERTIFICATE NUMBER: 2022031517047198





April 16, 2022

JOCELYN ROMERO 15339 BOWMANS FOLLY DR MANASSAS, VA 20112 US

SUBJECT: I & D PROJECTS INC. Ref. Number: W22000051178

We have received your document for I & D PROJECTS INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

RECEIVED

Letter Number: 022A00008944

MAY O B TULL