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| (Requestor's Name) | | | | | | |
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| (City/State/Zip/Phone #) | | | | | | |
| PICK-UP WAIT MAIL | | | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

KECEIVED

FILED 2022 MAY 19 AH 9: 57

K. Brumbley

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

| D | ate: | 05/19/2022 | NI |
|-----------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------|----------|
| | | Acc#I20160000072 | 4: () W |
| Name: | AbraSilve | r (US) Resource Corp. | |
| Document #: | | | |
| Order #: | 14339310 | | |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification: | Certifie | Country of Destination: Number of Certs: | |
| Availability | Plain: COGS: | | |
| Examiner Updater Verifier W.P. Verifier Ref# | | | |

Thank you!

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.

| | orporation; must include "INCORPORATED," " orp," "Inc." "Co," or "Corp.") | COMPANY." "CORPORATION | ₫," | |
|--------------------------------------------------------------|---------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------|--|
| (If name unavails | ible in Florida, enter alternate corporate name add | opted for the purpose of transactin | g business in Florida) | |
| Delaware | 3 | | | |
| (State or country under the law of which it is incorporated) | | (FEI number, if ap | (FEI number, if applicable) | |
| May 13, 2022 | | | | |
| (Date | of incorporation) | (Date of duration, if other | (Date of duration, if other than perpetual) | |
| · | | | | |
| 220 D Stanct S | (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 | lorida, if prior to registration) 2. F.S., to determine penalty liability | ity) | |
| 220 Bay Street, 5 | uite 550, Toronto, ON M5J 2W4 (Principal office | street address) | | |
| | | | 202 | |
| | (Current mailing a | address, if different) | 2022 HAY | |
| | | | | |
| . Name and stree | et address of Florida registered agent: (P.O. 1 | Box <u>NOT</u> acceptable) | | |
| | et address of Florida registered agent: (P.O. I CT Corporation System | Box NOT acceptable) | | |
| Name and <u>stree</u> Name: Office Address: | | Box <u>NOT</u> acceptable) | | |
| Name: | CT Corporation System 1200 South Pine Island Road | Box NOT acceptable) , Florida 33324 | FILED 19 AM 9: | |

9. Registered agent's acceptance:

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.

Kathryn A. Widdoes (Registered agent's signature) Assistant Secretary

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.

DocuSign Envelope ID: BD0C8D1E-3F1A-47DA-B84C-806E250D3A9E

| A. DIRECTORS | John Miniotis | 5 00 - | Carlos Pinglo | |
|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------|--|
| □Chairman | Name: | | Name: 220 Bay Street, Suite 550 | |
| □ Vice Chairman | Address: Toronto, ON M5J 2W4 | _ □ Vice Chairman | Address: Toronto, ON M5J 2W4 | |
| 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 | Other | |
| □Chaiπnan | Name: | □Chairman | Name: | |
| □Vice Chairman | Address: | | Address: | |
| □Director | | Director | | |
| □President | | □President | | |
| □Vice President | | □Vice President | | |
| ☐ Secretary | □Treasurer | — □Secretary | ☐ Treasurer | |
| □Other | □Other | Other | □Other | |
| Important Notice: individuals may b | Use an attachment to report more than six (6) Biggleded to the index when filing your Florida Miniotis 3A85C07D404 Signature of | Department of State Annual R | cepon form. | |
| The officer or direction she is aware that s.817.155, F.S | ector signing this document (and who is listed false information submitted in a document to the state of the | in number 11 above) affirms t | that the facts stated herein are true and that he o tutes a third degree felony as provided for in | |

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ABRASILVER (US) RESOURCE CORP." 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 NINETEENTH DAY OF MAY, A.D.

2022.

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

Authentication: 203472083

Date: 05-19-22