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COVER LETTER

	Registration Section Division of Corporations				
SUBJE	CT: DSK CONSTR	RUCTION GROUP	INC		
00		Name of co	rporation -	nust include suffix	
Dear Sir	r or Madam:				
"Certific		r "Certificate of C	lood Standi	thorization to Transact Eng" and check are submit in Florida.	
Please re	eturn all corresponde	ence concerning th	nis matter to	the following:	
VALERI	II A GUNDOROV				
			Name of Pe	rson	
DSK CO	NSTRUCTION GRO	UP INC			
		F	irm/Compa	ny	
11044 L0	ONGBOAT KEY LN	APT 309			
			Address		
TAMPA	, FL 33626				
		Cit	y/State and	Zip code	
vgundore	ov@gmail.com				
	E	-mail address: (to	be used for	future annual report noti	fication)
For furth	her information conc	erning this matter	, please call	:	
VALERI	$\frac{\text{VALERII A GUNDOROV}}{\text{Name of Person}} = \frac{\text{at } (\frac{934}{\text{Area Code}})}{\text{Area Code}} \frac{444-5544}{\text{Daytime Teleptor Teleptor Code}}$		444-5544		
	Name of Person	u(_	Area Code	Daytime Telephor	e Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sect Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Please m	d is a check for the f ake check payable to: 00 Filing Fee		e & 🗆 S		■ \$87.50 Filing Fee. 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 co	CTION GROUP INC reporation; must include "INCORPORATED, rp," "Inc," "Co," or "Corp.")	" "COMPANY." "CORPORATION."		
		adopted for the purpose of transacting business	s in Florida)	-
2. NEW YORK	3.	83-2253594 (FEI number, if applicable)		-
(State or country	under the law of which it is incorporated)	•		
4. <u></u>	of incorporation) 5.	Perpetual		-
(Date	of incorporation)	(Date of duration, if other than perpe	nuar)	
6. Upon Registratio				
	(Date first transacted business i	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
1937 I VMF AVE	SUITE 1, BROOKLYN, NY 11224			
7	(Principal off	fice street address)		_
	(i maipur on	······································		
	(Current maili	ng address, if different)		,
8. Name and <u>stree</u> Name:	a <u>address</u> of Florida registered agent: (P.) VALERII A GUNDOROV	O. Box <u>NOT</u> acceptable)	The second of Manual De	7072 JUN 1
Office Address:	11044 LONGBOAT KEY LN APT 309			2 Y CHANGE
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TAMPA	Florida		<u>:</u>
	(City)	(Zip code)	· · · U))
designated in this	ted as registered agent and to accept serv	vice of process for the above stated corpor tment as registered agent and agree to act relative to the proper and complete perfor osition as registered agent.	ration at the in this cap	e place acity. I
_	(Registered agent's	signature)		

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	VALERII A GUNDOROV	Chairman Nama	
□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman Address: _	
Director	APT 309, TAMPA, FL 33626	☐Director	
■ President		□ President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	□Other
□Chairman	Name:	□Chairman Name:	
	Address:	□Vice Chairman Address:	
□Director		Director	
□President		□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
individuals may	Use an attachment to report more than six (6). To be added to the index when filing your Florida De Signature of Dir	narrowent of State Annual Report form	rting purposes only. Non-indexed .

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.\$17.155, F.S.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

1, 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: DSK CONSTRUCTION GROUP INC

DOS ID Number: 5428616

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 10/18/2018

Statement Status: CURRENT Statement Due Date: 10/31/2022

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 May 11, 2022 at 11:56 A.M.

Brandon C Higher

ROBERT J. RODRIGUEZ, Secretary of State

By Brendan C. Hughes

Executive Deputy Secretary of State

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