Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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			2027
To:			J: 12
10:	Division of Corporations		2
	Fax Number : (850)617-6383		2
5			
From:	: Account Name : PAUL SALVER, P.	Α.	Ċ
	Account Number : 120020000087		7
	Phone : (954)389-1333 Fax Number : (954)389-1397		ζ.
	Fax Number : (334)383-1397		
a	r the email address for this busines onnual report mailings. Enter only of email Address:	ne email address please	**
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COVER LETTER

_	stration Section ion of Corporations					
SUBJECT:						
SUBJECT:	Name of corporation - must include suffix					
Dear Sir or M	ladam:					
"Certificate o	"Application by Foreign Corp f Existence," or "Certificate o leed foreign corporation to trai	f Good Stand	ing" and check are subi		,,	
Please return	all correspondence concerning	g this matter t	o the following:			
Daniella Santa	na					
		Name of P	erson			
Salver & Cook	LLP					
		Firm/Comp	any		20	
2721 Executive	e Park Drive, Suite 4				2022	
		Addres	S		: 22 Pi	
Weston, Florid	la 33331				22	
		City/State an	d Zip code		70	
d.santana@psc	•	, , , , , , , , , , , , , , , , , , , 			2 25	
	E-mail address:	(to be used fo	т future annual report п	otification)	ري ح	
For further in	formation concerning this ma	tter, please ca	11:			
Daniella Santa	na a	954 it (3891333			
Nam	e of Person	Area Code	Daytime Telepl	none Number		
Regis Divis The C 2415	EET/COURIER ADDRESS stration Section sion of Corporations Centre of Tallahassee N. Montoe Street, Suite 810 hassee, FL 32303	:	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7		
Enclosed is a Please make of \$70.00 Fil	check for the following amounted payable to: FLORIDA DEI ling Fee	PARTMENT (Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing F Certificate of S Certified Copy	Status &	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

srea Finance SA Corp	
tter name of corporation; must include "INCORPORAT e.," "Coi," "Corp," "Inc," "Co," or "Corp.")	TED," "COMPANY," "CORPORATION;"
name unavailable in Florida, enter alternate corporate n	name adopted for the purpose of transacting business in Florida
inois	90-1007799
state or country under the law of which it is incorporate	ed) (FEI number, if applicable)
7/24/2013	5. (Date of duration, if other than perpetual)
(12) On the Property of the Pr	(Time of duration, if other than perpetual)
725/2022	ness in Florida, if prior to registration)
(SUE SECTIONS 697.1501 & 6 Hexecutive Park Drive, Suite 4 Westen, Florida 33331	607.1507, F.S., to determine penalty liability)
I PERCHANG PARK LIMPS, MAIRS & WESTING LIMPING 25221	
	pol office street address)
Principa	
(Principe (Current of same and street address of Florida registered agent:	ol office street address) mailing address, if different)
(Principe (Current of ame and <u>street address</u> of Florida registered agent:	nailing address, if different): (P.O. Box NOT acceptable)
(Principe (Current of and afrect indiress of Florida registered agent: Name: 2721 Executive Park Drive Suite 4	nailing address, if different): (P.O. Box NOT acceptable)

10. Attached is a certificate of existence duly authoriticated, 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 of freem and/or directors (up to six (6) total):

and I am famillar with and accept the obligations of my position as registered agent.

A. DIRECTORS				(((H2200021432	1 3)))
[]Chairman	Name:	OChalrman .	Nanze:		
□ Vice Chairman	Address: 2721 Executive Park Drive	□ Vice Chairman	Address:		
□ Director	Suite 4, Westun-Fl 33331	Director			
President		□President			
□Vice President		□Vice President			
□Sceretary	□ Tressura	□Secretary		□ Itelsutci	
CiOiher		[]Other		□Other	
□Chainnan	Name:	Chuirman	Name:	····	
DVice Chalmian	Addresa:	□Vice Chalman	Addités:	·····	
○Director		Director .			
C) President		[]Proxident	<u> </u>		
Ovice President		□Vice President			
□Scendary	OTreasure/	DSecretary		[]Treasurer	
Odie/	DOINgr	Oiher		DOther	2012
□Chaimun	Namiè:	ElChairman			, -
ElVice Chairman	Address:	□Vice Chairman	Address:		
□Director		Director		,,	<i>∽</i> ~~~
□President -		□President	<u> </u>	<u> </u>	
□Vice President	·	OVice President		· · · · · · · · · · · · · · · · · · ·	
Sections:	(Treassier	□ Secretary		O'Treasurer	
□Other		🗆 🗀 🔝		[]Other	
	the on attachment to report more than six (6). The attached to the Index when filling your Florida Departm			purpases only. Non-11	ndaxed
12	Signature of Director	or Öfficer			•
she is aware that t x.817.155, P.S.	zeur signing this document (and who iz listed in numb [also information submitted in a document to the Depu	er 11 above) affinist finent of State cousts	hat the facts state nates a third degr	ed herein are and and see felony as provided	i that he or I far in
13. Walter Tur	tbaco (Typed or printed upine and capacity of pen	on similar analicatio	n)		
	fished or bringer four and estucits or her	era serine abbutant			

File Number

6915-936-2



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

SKARES FINANCE S.A., CORP., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 24, 2013, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND ASOF 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 24TH day of MAY A.D. 2022 .

Desse White

Authentication #: 2214404052 verifiable until 05/24/2023