

7/8/22, 11:11 AM

Division of Corporations

Handwritten scribbles and numbers: 2200004276

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H22000233208 3)))



H220002332083ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: JBurnham@GoAccountants.com

Section 6054, Florida
FALL ANNUAL REPORT FILING

2022 JUL 11 PM 12:22

FILED

2022 JUL 11 AM 8:52

FOREIGN PROFIT/NONPROFIT CORPORATION
Extrategic Culture, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

H22000233208 3

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. Extrategic Culture, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 86-1218858
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/1/2021 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 601 W 57th St 16a, New York, New York 10019
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Diana Pieretti
Office Address: 251 Crandon Blvd #702
Key Biscayne Florida 33149
(City) (Zip code)

FILED
2022 JUL 11 PM 12:21
SHELLY M. HARRIS, CLERK
DEPARTMENT OF STATE

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.

Diana Pieretti
(Registered agent's signature) 6/23/22

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 informational purposes, list names, titles and addresses of the primary officers and or directors (up to six (6) total)

H22000233208 3

H22000233208 3

A. DIRECTORS

Chairman Name: Jeffrey Duque
 Vice Chairman Address: _____
 Director 601 W 57th St 16a
 President New York, New York 10019
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: Diana Pieretti
 Vice Chairman Address: _____
 Director 601 W 57th St 16a
 President New York, New York, 10019
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

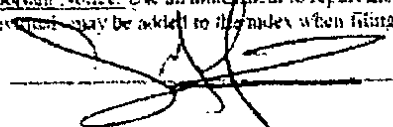
Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer _____
 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.

11  _____
 Signature of Director or Officer 6/22/22

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. 317.155, F.S.

13 Jeffrey Duque, President
 (Typed or printed name and capacity of person - include application)

H22000233208 3

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:	EXTRATEGIC CULTURE, INC.
DOS ID Number:	5904685
Entity Type:	DOMESTIC BUSINESS CORPORATION
Entity Status:	EXISTING
Date of Initial Filing with DOS:	12/28/2020
Effective Date:	01/01/2021
Statement Status:	CURRENT
Statement Due Date:	12/31/2022

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 June 24, 2022 at 10:23 A.M.

ROBERT J. RODRIGUEZ, Secretary of State



Brendan C. Hughes

By Brendan C. Hughes
Executive Deputy Secretary of State

Authentication Number: 100001772586 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <http://ecorp.dos.ny.gov>