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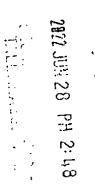
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S. ROBERTS JUN 2 8 2022

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: IGS INTERNA	ATIONA	L INC.	
		must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Cor "Certificate of Existence," or "Certificate of above referenced foreign corporation to tra	of Good Standi	ng" and check are subn	
Please return all correspondence concernin	ng this matter to	the following:	
	Name of Pe	rson	
TABS INC.			
	Firm/Compa	nny	
228 E. 45TH ST. STE	E. 9E		
NEW YORK, NY 100	Address	;·	
	City/State and		
COMPLIANCE@TABS	INC.CO	M	
E-mail address:	(to be used for	future annual report no	otification)
For further information concerning this ma	ntter, please cal	l :	
KIRKE MARSH	at (347	0 694-5321 Daytime Teleph	
Name of Person	Area Code	Daytime Teleph	one Number
STREET/COURIER ADDRESS Registration Section	i:	MAILING AD Registration Se	ction
Division of Corporations The Centre of Tallahassee		Division of Cor P.O. Box 6327	
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Tallahassee, FL	
Enclosed is a check for the following amount of the check payable to: FLORIDA DE		F STATE	
S70.00 Filing Fee S78.75 Filing Certificate of	Fee & 🗆 S	578.75 Filing Fee & Certified Copy	S87.50 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.

(If name unavail	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting	g business in Florida)
(State or country 22 JUL)	y under the law of which it is incorporated) Y 2021	FEI number. if ap	
(Date	of incorporation)	(Date of duration, if other	:han perpetual)
228 E. 4		s in Florida, if prior to registration) .1502, F.S., to determine penalty liabili V YORK, NY 10017	ty)
		ffice street address)	
Name and stree	(Current mai	ling address. if different)	2922 JUN 29
Name:	Northwest Registered Agen	- · ·	$\tilde{\omega}$
ice Address:	7901 4th St N STE	300	PH 2:
	St. Petersburg (City)	Florida 33702 (Zip code)	ر, 80 ئالى
ving been nam signated in this	ent's acceptance: ned as registered agent and to accept ser application, I hereby accept the appoin omply with the provisions of all statutes	itment as registered agent and agre	ee to act in this capacity

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	Johannes Henricus Maria (Hans) Arts	□Chairman	Petrus Bartholomeus Wilhelmus (Peter) Merten Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
☑Director	228 E. 45TH ST. STE. 9E NEW YORK, NY 10017	□Director	228 E. 45TH ST. STE. 9E NEW YORK, NY 1001
□President		☑ President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□Secretary	☑ Treasurer
Other	Other	Other	Other
□Chairman	Name: Jacob Willemsen	□Chairman	Christel Wilhelmina (Christel) Wolferin
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director	228 E. 45th St. Ste. 9E New York, NY 10017	□Director	228 E. 45th St. Ste. 9E New York, NY 1001
□President		□President	
□Vice President		□Vice President	
☑ Secretary	□Treasurer	□Secretary	☑ Treasurer
Other	Other	Other	Other
□Chairman	Name: Kirke Marsh	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director	228 E. 45th St. Ste. 9E New York, NY 10017	□Director	
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	Secretary	Treasurer
☑Other Asst. Se	ecretary Other	Other	□Other
individuals may be	Use an attachment to report more than six (6). The at added to the index when filing your Florida Departs	ttachment will be image nent of State Annual Re	d for reporting purposes only. Non-indexed eport form.
12	Signature of Director	r or Officer	
	V i		

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.817.155, F.S.

_{13.} Kirke Marsh, Asst. Secretary



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

DELAWARE, DO HEREBY CERTIFY "IGS INTERNATIONAL INC." 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 TWENTY-THIRD DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IGS

INTERNATIONAL INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF

JULY, A.D. 2021.

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

Authentication: 203746245

Date: 06-23-22