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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Commercial Building N	lanagement Inc.		
	ame of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Certificate of Existence," or "Certificate of existence," or "Certificate of foreign corporation above referenced foreign corporation."	ficate of Good Stand	ding" and check are sub-	t Business in Florida," mitted to register the
Please return all correspondence cor	cerning this matter	to the following:	
Sung Yi Choe			
	Name of I	Person	
Commercial Building Management, Inc	,		
	Firm/Com	pany	
4801 Greenbrooke Dr			
	Addre	58	
Glen Allen, VA 23060-6175			
	City/State ar	id Zip code	
es/g topehm.com			
E-mail ad	ldress: (to be used fi	or future annual report n	otification)
For further information concerning t	his matter, please ea	ıll:	
CS@TOPCBM.COM	at (494-9554	
Name of Person	Area Code	Daytime Teleph	ione Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following Please make check payable to: FLORII S70.00 Filing Fee S78.75 Certific	DA DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy

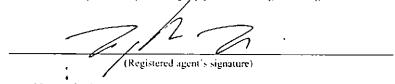
AMPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

COMMERCIAL	LBUILDING MANAGEMENT INC.		
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp,")	." "COMPANY," "CORPORATION,"	
CBM			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida	
VIRGINIA 3		87-1121735	
(State or country under the law of which it is incorporated)		(Fill number, if applicable)	
JUNE 9, 2021	5		
(Date	of incorporation)	(Date of duration, if other than perpetual)	
9,			
		in Florida, if prior to registration) 502, F.S., to determine penalty hability)	
7 4801 GREENBR	OOKE DR, GLEN ALLEN, VA 23060-6175		
· 	(Principal off	lice <u>street</u> address)	
4990 SADLER F	PL UNIT 4891, GLEN ALLEN, VA 23060		
	(Current maili	ng address, if different)	
Name and street	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	YONG YI		
Office Address:	4258 ROCKHILL LOOP		
	APOPKA	, Florida 32712	
	(City)	(Zip code)	

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.



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 initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total];

A. DIRECTORS						
☐Chairman	Name:	□Chairman	Name: MIN K JOO			
□Vice Chairman	Address: 4801 GREENBROOKE DR	■Vice Chairman	Address:			
□Director	GLEN ALLEN, VA 23060	□Director	GLEN ALLEN, VA 23059			
■ President		□President				
∐Vice President		□Vice President				
ElSecretary	☐Treasurer	LISecretary	☐ Treasurer			
[]Other	[]Other	LJOther	□Other			
□Chairman	Name: YONG H YI	□Chairman	Name:			
	4258 ROCKHILL LOOP					
	APOPKA, FL 32712	_	Address.			
□Director		□Director				
IIPresident		□President				
□Vice President		□Vice President				
■Secretary	□Treasurer	□Secretary	☐Treasurer			
■Other VP/OPER	RATION Other	[]Other	□Other			
∐Chairman	Name:	□ Chairman	Name:			
[IVice Chairman	Address:	□Vice Chairman	Address:			
TIDirector		□Director				
ElPresident		©President				
□Vice President		∏Vice President				
□ Secretary	□Treasurer	□ Secretary	□ Freasurer			
□Other	Other	UOther	Other			
Important Notice: Individuals may be	Use an attachment to report more than six (6). The attac added to the index when filing your Florida Departmen	nt of State Annual Re	d for reporting purposes only, Non-indexed port form.			
12	Signature of Directors	\sum_{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 fellow as provided for in <.817.155. F.S.						

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(Typed or printed name and capacity of person signing application)

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That Commercial Building Management Inc. is duly incorporated under the law of the Commonwealth of Virginia:

That the corporation was incorporated on June 9, 2021;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

9



Signed and Sealed at Richmond on this Date:

October 25, 2022

Bernard J. Logan, Clerk of the Commission