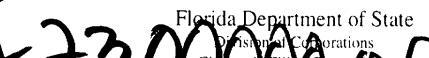
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Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

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2ND Resubmission

Foreign Limited Liability Company Schryver Logistics USA Inc

Certificate of Status	1
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Help

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.

L. Schryver Logi:			
(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY." "CORPORATION,"	
(If name unavai	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting business	in Florida)
2. Texas	3		
(State or count	try under the law of which it is incorporated)	(FEI number, if applicable)	
4. 03/16/2021	5.		
(Dat	e of incorporation) 5.	(Date of duration, if other than perpet	mal)
6			
	(Date first transacted business in E (SEE SECTIONS 607.1501 & 607.150)		
7. 7950 NW 77 Street, Unit 1 Miami, FL 33166		38.	
(Principal office street address)			
7950 NW 77 St	reet, Unit 1 Miami, FL 33166		
	(Current mailing	address, if different)	(
8. Name and stre	eet address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Roberto Lopez		-5 -2
Office Address:	7950 NW 77 Street, Unit 2	<u> </u>	
	Miami	Florida	
	(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.

Ashley Perkins	Ashley Perkins, Attorney-in-Fact
(Registered age	nt'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 Roberto Lopez □Chairman □ Chairman Name: 7950 NW 77 Street, Unit 2 Address: ☐Vice Chairman □Vice Chairman Address: Miami, FL 33166 Director □Director ☐ President □President □Vice 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 ☐Treasurer (* *) □ Secretary □Treasurer □ Secretary □Other ____ □Other ____ □Other _____ Name: □ Chairman □ Chairman □Vice Chairman Address: ☐ Vice Chairman Address: Director Director □ President ☐ President □Vice President □Vice President □ Secretary □ Treasurer □ Secretary □Treasurer □Other _____ □Other _____ □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. Ashley Perkins

Signature of Director or Officer

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.

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jose A. Esparza Deputy Secretary of State

Office of the Secretary of State

Certificate of Fact

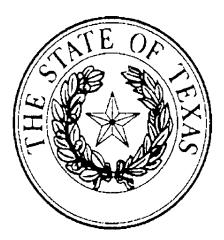
The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Schryver Logistics USA Inc (file number 803976077), a Domestic For-Profit Corporation, was filed in this office on March 16, 2021.

It is further certified that the entity status in Texas is in existence.

1000

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 10, 2023.





Phone: (512) 463-5555

Prepared by: SOS-WEB

Jose A. Esparza Deputy Secretary of State

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 1211846080003