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S. FRANKLIN FEB 1 7 2023

COVER LETTER

	stration Section sion of Corporations				
SUBJECT:	Manfra, Tordella & Brooke				
	Name	of corporation -	must include suffix		
Dear Sir or N	1adam:				
"Certificate of	"Application by Foreign C of Existence," or "Certificat need foreign corporation to	e of Good Standi	ng" and check are submitt		
Please return	all correspondence concerr	ning this matter to	the following:		
Kevin Connel	1				
		Name of Pe	rson		
Manfra, Torde	ella & Brookes, Inc			1623	
		Firm/Compa	ny	711	
48 W 37th Str	ect 17th Floor			 1	
		Address		-n	
New York, N	Y 10018			<u>:</u> 	
		City/State and	Zip code	•)	
kconnell@mtl	ometals.com				
	E-mail addres	s: (to be used for	future annual report notif	ication)	
For further in	formation concerning this r	natter, please cal	:		
Nicole Pirz		at (212	981-4550 ext 231 Daytime Telephone		
Nam	e of Person	Area Code	Daytime Telephone	e Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Secti Division of Corpo P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	check for the following amneck payable to: FLORIDA Bing Fee \$78.75 Filit Certificate	EPARTMENT O		\$87.50 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.

(Enter name of c	a & Brookes, Inc orporation; must include "INCORPORATEI	D," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	orp," "Inc." "Co," or "Corp.")		
(If name unavaila	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in	Florida)
New York, USA	· -	3	
(State or countr	y under the law of which it is incorporated)	G. (FEI number, if applicable)	_
February 22, 20	of incorporation)	Perpetual	
(Date	of incorporation)	(Date of duration, if other than perpetual)
N/A			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
18 W 37th Street,	17th Floor New York, NY 10018		
		flice street address)	
48 W 37th Street	, 17th Floor New York, NY 10018		7
	(Current mail	ing address, if different)	W.
Name and stree	t address of Florida registered agent: (P	.O. Box NOT acceptable)	!
Name:	Nicole Pirz		7:
fice Address:	2851 Evans Street		بة. ١
nee Address.	Hollywood	33020	க்
	(City)	$\frac{33020}{\text{(Zip code)}}$	
ving been nam signated in this ther agree to co	application, I hereby accept the appoin	vice of process for the above stated corporation tment as registered agent and agree to act in the relative to the proper and complete performan position as registered agent.	his capacity.
	(Panictored august's	simmeture)	
	(Registered agent's	arguature)	

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

under the law of which it is incorporated.

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

A. DIRECTORS Chris Carkner Kevin Connell Chairman Chairman 48 W 37th St 17th Floor 48 W 37th St 17th Floor □Vice Chairman Address: □Vice Chairman Address: New York, NY 10018 New York, NY 10018 **■** Director Director □President □President ☐ Vice President ☐ Vice President □Secretary □ Treasurer □ Secretary Treasurer Other □ Other _____ Other _____ □Other ____ Name: Venkata Gopalakrishnan

The Hour Ochairman Chairman Name: New York, NY 10018 □Vice Chairman Address: □Vice Chairman Address: New York, NY 10018 Director □Director □President □President □Vice President □Vice President ☐Treasurer ~> ☐ Secretary □Treasurer ☐ Secretary □Other _____ □Other _____ Other _____ □Other _____ Name: _____ □ Chairman Chairman Name: Address: □Vice Chairman Address: ☐ Vice Chai⊓nan □ Director □ Director □ President □President □Vice President ___ ☐Vice President ☐ Secretary □Treasurer □ Secretary ☐ Treasurer □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.

12. 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.

, Kevin Connell - Director

A CONTRACTOR OF A CONTRACTOR

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: MANFRA TORDELLA & BROOKES, INC.

DOS ID Number: 2734496

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 02/22/2002

Statement Due Date: 02/29/2024

Statement Status:

No information is available from this office regarding the financial condition, business activity or practices of this entity.

CURRENT



WITNESS my hand and official seal of the Department of State, at the City of Albany, on January 04, 2023 at 10:08 A.M.

Brandon C. Higher

ROBERT J. RODRIGUEZ, Secretary of State

By Brendan C. Hughes

Executive Deputy Secretary of State

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