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NAME: DRAYING INC

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	egistration Section vision of Corporations		
SUBJEC	T: DRAYING INC		
002020		f corporation	n - must include suffix
Dear Sir o	r Madam:		
"Certificat		of Good Star	Authorization to Transact Business in Florida," nding" and check are submitted to register the ess in Florida.
Please retu	ırn all correspondence concernin	g this matte	er to the following:
Drew Beru	be		
		Name of	Person
PAGLAW	PLLC		
		Firm/Con	npany
1441 Brick	ell Ave. Suite 1120		
		Addr	ress
Miami, FL	33131		
		City/State a	and Zip code
ines@pag.l	aw		
	E-mail address:	(to be used	for future annual report notification)
For further	information concerning this ma	tter, please o	call:
Drew Berube		786	292-1599
N	ame of Person	Area Cod	Daytime Telephone Number
Re Di Th 24	REET/COURIER ADDRESS registration Section vision of Corporations are Centre of Tallahassee 15 N. Monroe Street, Suite 810 llahassee, FL 32303	:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
	s a check for the following amous check payable to: FLORIDA DEI Filing Fee S78.75 Filing Certificate of	PARTMENT Fee & E	T OF STATE □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status of 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.

DRAYING INC			
(If name unavail	able in Florida, enter alternate corporate name ado	opted for the purpose of transacting	business in Florida)
Delaware	3 77	200500	
(State or countr	y under the law of which it is incorporated)	(FEI number, if app	licable)
11/12/2019	5		
(Date	of incorporation)	(Date of duration, if other th	nan perpetual)
	(Date first transacted business in F		
	CUU CUCTIONS AND 1501 & 600 1500	LC to determine a confine linkility	
31 SF 5th St. Am	(SEE SECTIONS 607.1501 & 607.1502 t 3010 Miami, FL 33131	, F.S., to determine penalty liability	y)
31 SE 5th St, Ap	t 3010, Miami, FL 33131		y)
31 SE 5th St, Ap			y)
31 SE 5th St, Ap	t 3010, Miami, FL 33131 (Principal office		
31 SE 5th St, Ap	t 3010, Miami, FL 33131 (Principal office	street address)	
	t 3010, Miami, FL 33131 (Principal office	street address) ddress, if different)	
Name and stree	t 3010, Miami, FL 33131 (Principal office (Current mailing a	street address) ddress, if different)	2023 FEB 1
·	(Principal office (Current mailing a et address of Florida registered agent: (P.O. F	street address) ddress, if different)	2023 FEB 17
Name and stree	(Principal office (Current mailing a et address of Florida registered agent: (P.O. F	street address) ddress, if different)	2023 FEB 17
Name and stree	(Principal office (Current mailing a et address of Florida registered agent: (P.O. F	street address) ddress, if different)	2023 FEB 1

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.

- Registered agent's signature)

Madonna Cuddihy, Assistant Secretary

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 Gerardo Bonell ☐ Chairman ☐ Chairman Name: □Vice Chanman Address: ___ ☐ Vice Chairman Address: 31 SE 5th St, Apt 3010 Director Director Miami, FL 33131 President □President □Vice President □Vice President Secretary ■ Treasurer ☐ Secretary □Treasurer □Other _____ □Other _____ □ Other _____ □Other _____ Name: _____ □ Chairman □ Chairman Name: □Vice Chairman Address: □ Vice Chairman Address: □ 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 ☐ 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. 12. _ Gerardo Bouell 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. Gerardo Bonell, President and Director

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DRAYING 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 THIRTIETH DAY OF DECEMBER, A.D. 2022.

Authentication: 205222376

Date: 12-30-22