F2300001529

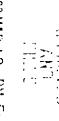
(R	equestor's Name)			
	ddress)			
`	,			
(A	ddress)	-		
(C	ity/State/Zip/Phone #)	**		
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name)			
(U	ocument Number)			
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
W23-3L	1883			

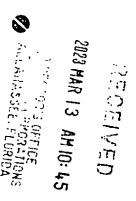
Office Use Only



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EAR 1 6 2023



March 14, 2023

CSC

Piease give original submission date as file date.

SUBJECT: WILTON CROSS, INC. Ref. Number: W23000034883

We have received your document for WILTON CROSS, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the title for Joshua Nussbaum.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 623A00005893



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	•	1200000001	95

REFERENCE: 576349 833861

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE: March 13, 2023

ORDER TIME : 10:14 AM

ORDER NO. : 576349-010

CUSTOMER NO: 8338618

FOREIGN FILINGS

NAME: WILTON CROSS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

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	lable in Florida, enter alternate corporate name ac	dopted for the purpose of transacting b	ousiness in Florida)	
Delaware	3 8	87-2590168		
(State or country under the law of which it is incorporated) 09/10/2021 (Date of incorporation) 5.		(FEI number, if applicable)		
		(Date of duration, if other than perpetual)		
Upon filing	. or meorporationy	(Date of duration, it other than	ii perpetuar)	
	reet, Tampa, FL 33617 (Principal office Road, Wassaic, NY 12592	e <u>street</u> address)		
	(Current mailing	address, if different)	2023 HAK	
	et address of Florida registered agent: (P.O.	Box NOT acceptable)	٠	
Name and stre			. د	
Name and streen Name:	Corporation Service Company			
	Corporation Service Company 1201 Hays Street	<u> </u>		
Name:		, Florida		

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.

A. DIRECTORS				
□ Chairman	Yury Yakubchyk Name:	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	Wassaic, NY 12592	□Director	e778.5	
□President		□President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	Secretary		□Treasurer
□Other	Other	□Other		Other
□ Chairman	Jonathan Amos	□Chairman	Name:	
□Vice Chairman	Address: 31 Bog Hollow Road	□Vice Chairman		
□Director	Wassaic, NY 12592	Director		
□President		☐ President		
□Vice President		□ Vice President		
Secretary	☐Treasurer	☐ Secretary		□Treasurer
Other COO	Other	□Other		Other
□Chairman	Name:	□Chairman	N	
	Address: 31 Bog Hollow Road			
	Waasaic, NY 12592		Address:	
□Director		□Director		
□President		□President		
□Vice President	-	☐ Vice President		
Secretary	☐ Treasurer	☐ Secretary		□Treasurer
Other COC	Other	□Other		Other
individuals may be	Ise an attachment to report more than six (6). The attace added to the index when filing your Florida Department Signature of Director of	nt of State Annual Re	I for reporting purport form.	rposes only. Non-indexed
The officer or direct she is aware that fall s.817.155, F.S.	or signing this document (and who is listed in number se information submitted in a document to the Departs	11 above) affirms the nent of State constitut	at the facts stated tes a third degree	herein are true and that he or felony as provided for in
13. Jonathan Am	08, COO			
	(Tuned or printed come and amarity - P	a almuluu ammili mel		

Delaware

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "WILTON CROSS, 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 THIRTEENTH DAY OF MARCH, A.D. 2023.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WILTON CROSS, INC." WAS INCORPORATED ON THE TENTH DAY OF SEPTEMBER, A.D. 2021.

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

Authentication: 202896003

Date: 03-13-23