Division of Corpo attons

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number: 120120900007 : (702)866-2500 Phone Fax Number : (702)900-2290

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

Email Address: documents@incorp.com

FOREIGN PROFIT/NONPROFIT CORPORATION Petrali Roofing

Certificate of Status	0	
Certified Copy	0	
Page Count	05	
Estimated Charge	\$70.00	0
\$		Middle Committee

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COVER LETTER

TO:	Registration Division of	Section Corporations		
SUBJ	ECT: Petra	ali Roofing		
		Name of corporation	- must include suffix	
Dear S	ir or Madam:			
"Certif	icate of Exist	ication by Foreign Corporation for Fence," or "Certificate of Good Standaring corporation to transact business	ling" and check are subi	
Please	return all con	respondence concerning this matter	to the following:	
Kathy	Shin			
		Name of I	Person	<u> </u>
InCor	p Services, I	nc. / Kathy Shin		
		Firm/Com	pany	.>
3773	Howard Hug	hes Pkwy, Suite 500S		
_		Addres	SS	
Las V	egas, NV 89	169-6014		= = = = = = = = = = = = = = = = = = = =
		City/State an	d Zip code	۔ ۔
docur	ments@incor			
		E-mail address: (to be used for	or future annual report n	offication)
For fu	ther informat	ion concerning this matter, please ca	III:	
InCor	p Services, I	nc. / Kathy Shin at (800	246-2677	
	Name of Pe		Daytime Teleph	none Number
	Registration Division of The Centre	Corporations of Tallahassee nroe Street, Suite 810	MAILING Al Registration Se Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Please		for the following amount: rable to: FLORIDA DEPARTMENT S78.75 Filing Fee & Certificate of Status	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 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.

1. Petrali Roofir			
	corporation; must include "INCORPORATED, forp," "Inc," "Co," or "Corp,")	" "COMPANY," "CORPORATION,"	
Petrali Roofing	GOrp.		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Fl	orida)
2. Colorado	3.		
(State or countr	ry under the law of which it is incorporated)	(FEI number, if applicable)	
4. 05/03/2016	5.	(Date of duration, if other than perpetual)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
6. Upon Registra	ation		
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7. 5376 Tomah I	Drive Suite 101, Colorado Springs, CO	80918	<u> </u>
	(Principal off	ee street address)	
			
	(Current mailir	ng address, if different)	
8. Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	· · ·
Name:	InCorp Services, Inc.		1
Office Address:	3458 Lakeshore Drive		
	Tallahassee	Florida 32312	
	(City)	. Florida <u>32312</u> (Zip code)	
Having been nam designated in this further agree to c	application, I hereby accept the appoints omply with the provisions of all statutes rewith and accept the obligations of my po	ice of process for the above stated corporation a ment as registered agent und agree to act in this relative to the proper and complete performance sition as registered agent. hise Breytenbach on behalf of InCorp Services, I	s capacity. I e of my duties
	(Registered agent's s		

^{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.

∃Chairman	Name: David Petrati	□Chairman	Name:	
⊒Vice Chairman	Address:	□Vice Chairman	Address:	
Director	5376 Tomah Drive Suite 101	□ Director		
President	Colorado Springs, CO 80918	□President		
OVice President		□Vice President		
Secretary	■ Treasurer	□ Secretary		☐Treasurer
Other	Other	□Other	<u>.</u>	□Other
)Chai r man	Name:	□ Chairman	Name:	
Vice Chairman	Address:	☐Vsce Chairman	Address:	
Director		Director		
President		□President		
Vice President		□Vice President		
Secretary	Treasurer	□Secretary		□Treasurer
iOther	□Other	Other		□Other
		_		
Chairman	Name:	□Chairman	Name:	<u> </u>
Vice Chairman	Address:	□Vice Chairman	Address:	
Director		Director		
President		☐ President		
Vice President		□Vice President		
Secretary	□Treasurer	☐ Secretary		□Treasurer
Other	Other	⊞Other		DOther

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.

13. David Petrali, President

1 DIDECTORS

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Petrali Roofing

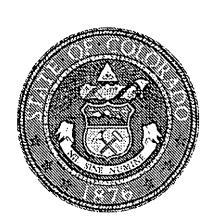
is a

Corporation

formed or registered on 05/03/2016—under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 201613 16639.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/24/2023 that have been posted, and by documents delivered to this office electronically through 03/28/2023 @ 17:30:13

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/28/2023 (@ 17:30:13 in accordance with applicable law. This certificate is assigned Confirmation Number 14825959



Jena Mucually

Secretary of State of the State of Colorado

Name. A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective However, as an option, the issuance and voltainy of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.voltarobisoco.gov/hit/Certificate/socials/allicitation entering the certificate scafficate's confirmation number displayed on the certificate and following the instructions displayed Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information visit our website, https://www.wolerobisocogov.click."Businesses, trademarks, trademarks, and select. "Frequently Asked Questions."