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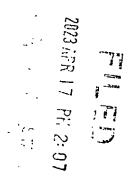
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4/29/23

COVER LETTER

TO:		on Section of Corporations						
SUBJ	ECT:	44X, Inc.		_			_	
			of corporation	n - mus	t include suffix			
Dear S	Sir or Madaı	m:						
"Certi	ficate of Ex	plication by Foreign C istence," or "Certificat foreign corporation to	e of Good Sta	inding'`	and check are subm	Business in nitted to regis	Florida ster the	a."
Please	return all c	orrespondence concert	ning this matt	er to the	following:			
	S	teven Zerilli				•	2027	
-			Name o	f Persor	1	-	E 3	1 4
	4	14X, Inc						, east
			Firm/Co	mpany		,	7	• 6 •
		II Bianca Blvd.				100	PK	
		·	Ado	iress		15	<u>-2</u>	
	ļ	Chester, NY 10918				<u> </u>	17	
•			City/State	and Zip	code			
	<u> </u>	stevez@chancellorav.	com			· · · · · · · · · · · · · · · · · · ·		
		E-mail addre	ss: (to be used	j for fut	ure annual report no	otification)		
For fu	rther inform	nation concerning this	matter, please	call:				
	Steven Zer		at (<u>845</u>)	344-7601	ana Numbar		
	Name of	Person	Area Co	ode	Daytime Teleph	ione Number		
	Registrat Division The Cent 2415 N.	T/COURIER ADDRE ion Section of Corporations tre of Tallahassee Monroe Street, Suite 8 see, FL 32303			MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations		
Piease	sed is a che make check 0.00 Filing		DEPARTME:	□ \$78	STATE .75 Filing Fee & tified Copy	□ \$87.50 Certifi Certifi	cate of	Status &

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.

			ing business in Fl	,
	Delaware 3. 26-0500913			
`	y under the law of which it is incorporated)	(FEI number, if a	• •	
<u>June 28,</u>		(Date of duration, if othe		
(Date	of incorporation)	(Date of duration, if othe	r than perpetual)	
			<u>~~</u>	
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration)	ility)	লেম্য
11 Riano	ea Blvd. Chester, NY 109		AP X	
Diane	(Principal of	fice street address)		a
	· ·		P.	11
	(Current maili	ing address, if different)	3: 8	*
Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	, 4	
Name:	Registered Agents Inc	,		
	7901 4th St N STE 300	<u> </u>		
fice Address:				
	St. Petersburg (City)	, Florida 33702		
	(City)	(Zip code)		
Registered age	ent's acceptance:			
wing been nam	ed as registered agent and to accept serv	vice of process for the above stat	ted corporation	at the f
signated in this	application, I hereby accept the appoint	tment as registered agent and ag	gree to act in the	is capac
rther agree to c A Lam familia	omply with the provisions of all statutes with and accept the obligations of my p	retative to the proper and comp position as registered agent.	ieie perjormuni	e oj mj
u i um jummu	with and accept the vongations of my p	g		
_				
· T) Al Volunts			
7	David Scherts			

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

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

A. DIRECTORS						
□Chairman	Name: Steven Zerilli	□ Chairman	Name:	Joseph Zerilli		
□Vice Chairman	Address: 11 Bianca Blvd. Chester, NY 10918	□Vice Chairman		122 Golf Links Rd. Apt 503 Middletown, NY 10940		
□Director		□Director				
⊠President		□President				
□Vice President		(XVice President				
⊠Secretary	Treasurer	☐ Secretary		□Treasurer		
Other	Other	□Other		□Other		
□Chairman	Name:	□Chairman				
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President		202		
Secretary	□Treasurer	□Secretary		□Treasurer		
Other	Other	Other		Other		
	\	□Chairman	Vamo:	P 17		
□Chairman	Name:			07		
□Vice Chairman	Address:		Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐Secretary		□Treasurer		
□Other	Other	Other		□Other		
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department of the partment of the partme	nt of State Annual R	eport form.			
12. Signature of Director or Officer						
The officer or dire she is aware that f s,817.155, F.S.	ector signing this document (and who is listed in number alse information submitted in a document to the Depart	r 11 above) affirms the ment of State constitution	hat the facts utes a third	s stated herein are true and that he o degree felony as provided for in		

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "44X, 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 FOURTH DAY OF APRIL, 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 FRANCHISE TAXES HAVE
BEEN PAID TO DATE.



Authentication: 203078149

Date: 04-04-23

4380744 8300 SR# 20231103836