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CORPORATE ACCESS, _____

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INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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CERTIFIED COPY		
РНОТОСОРУ		
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APPLIEATION 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.

(14)	ble in Florida, enter alternate corporate name a	donted for the purpose of transacti	ng business in Florida
Dalamas			
(State or country	y under the law of which it is incorporated) 3.	(FFI number if a	nnlicable)
(Date of incorporation) 5. (Date of duration, if other			than perpetual)
	·		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		lity)
390 NE 191st St.	#8019, Miami. FL 33179		
	(Principal offic	e street address)	
	(Current mailing	address, if different)	2023 KAY 30
Nome and street	t address of Florida registered agent: (P.O.	Rox NOT acceptable)	
Name and <u>succ</u>	Registered Agents Inc.	Box Moracceptante	30
Name:			P.A.
ffice Address:	7901 4th St N. Ste 300		့ ယ်
	St. Petersburg	Florida 33702	57
	(City)	(Zip code)	
	ent's accentance:		
Registered age	ed as registered agent and to accept servic	e of process for the above state	ed corporation at the
Registered age aving been nam		ent as registered agent and ag	ree to act in this capa
aving been nam signated in this	application, I hereby accept the appointm omply with the provisions of all statutes re	dative to the proper and count	oto norfarmance at m

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	Zaidur Rahman	_		
□Chairman	Name:	□Chairman		
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	Miami, FL 33130	□Director		
President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
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
□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
individuals may b	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department aidur Rahman	nt of State Annual R	eport form.	
12	Signature of Director of	or Officer	<u> </u>	
she is aware that the s.817.155, F.S.	ector signing this document (and who is listed in number false information submitted in a document to the Depart famon, President	r 11 above) affirms t ment of State constit	hat the facts stated lutes a third degree	I herein are true and that he or e felony as provided for in
13. <u>Zaluul Rain</u>	mian, i resident		n)	



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

DELAWARE, DO HEREBY CERTIFY "FLEXBASE TECHNOLOGIES, 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 TENTH DAY OF MAY, 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 "FLEXBASE

TECHNOLOGIES, INC." WAS INCORPORATED ON THE SECOND DAY OF JANUARY,

A.D. 2019.

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

Authentication: 203313648

Date: 05-10-23