F23000004120

(Requestor's Name)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Dusiness Chury Name)	
(Document Number)	
Certified Copies Certificates of Status	
	_
Special Instructions to Filing Officer:	
	Ì
	ĺ

Office Use Only



600411222476

06/29/23--01007--030 **78.75

COVER LETTER

TO:	_	ration Section on of Corpora			•			
SUBJ	ECT:	Lucrum Realty	Inc.					
5025				rporation	- must ii	nclude suffix	-	
Dear S	Sir or Ma	dam:						
"Certif	ficate of	Existence," o	y Foreign Corpora r "Certificate of G poration to transa	iood Stand	ding" an	d check are sub		siness in Florida," d to register the
Please	return al	il correspondo	ence concerning th	nis matter	to the fo	llowing:		
Edrees	Feda							
			1	Name of I	Person			-
Lucrun	n Realty.	Inc.						
,			ŀ	irm/Com	pany			
401 E.	Las Olas	Blvd, Suite 14	00					
	·			Addre	SS			
Fort La	auderdale.	FL 33301						
			Cit	y/State ar	nd Zip co	ode		
lucrum	realty@g							
		E	-mail address: (to	be used for	or future	annual report i	notific	cation)
For fu	rther info	ormation conc	erning this matter	, please ca	all:			
Edrees Feda at (703			206-8	206-8116				
	Name	of Person			 :	Daytime Telep	hone	Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Please:		ck payable to:	ollowing amount: FLORIDA DEPAR \$78.75 Filing Fee Certificate of Sta	e & 🗆	\$78.75	TE Filing Fee & ed Copy	▣	\$87.50 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.

Lucrum Realty.	Inc.						
	orporation: must include "INCORPORATED," - orp," "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION	C.	_			
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting	g business in Florida))			
VA.	A 3. 93-1714083 State or country under the law of which it is incorporated) (FEI number, if applicable)						
03/22 2022			_				
(Date	of incorporation)	(Date of duration, if other than perpetual)					
07/01/2023							
·	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		iy)	_			
, 401 E. Las Olas E	Blvd, Suite 1400 Fort Lauderdale, FL 33301						
•	(Principal office	street address)		_			
401 E. Las Olas I	Blvd, Suite 1400 Fort Lauderdale, FL 33301						
	(Current mailing a	address, if different)					
8. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. I Edrees Feda	Box <u>NOT</u> acceptable)	2023 JUH 29	· · · · · · · · · · · · · · · · · · ·			
Office Address:	401 E. Las Olas Blvd, Suite 1400	_	129 111A	e Tremo			
	Fort Lauderdale	, Florida ³³³⁰¹	PM II: 46	;			
	(City)	(Zip code)	· 	*EEEE			
Taving been nam lesignated in this arther agree to c	ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointmen omply with the provisions of all statutes rela with and accept the obligations of my positi	nt as registered agent and agre- tive to the proper and complete	corporation at the eto act in this capa	icity. 1			
	Colores Tool						
_	(Registered agent's signa	nture)					

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 Edrees Feda Chairman Chairman Name: □ Chairman Name: 401 E. Las Olas Blvd, Suite 1400 ■ Vice Chairman Address: □ Vice Chairman Address: Fort Lauderdale, FL 33301 Director □ Director President □ President ■ Vice President _____ □Vice President ■ Secretary Treasurer □ Secretary ☐Treasurer □Other _____ □Other _____ [Cother _____ □Other _____ □ Chairman □ Chairman Name: Name: □ Vice Chairman Address: ___ Address: □ Vice Chairman Director □ Director □ President □ President □ Vice President _ □ Vice President □ Treasurer □ Secretary ☐ Secretary ☐ Treasurer □Other _____ □Other _____ Name: Name: □ Chairman □ Chairman □Vice Chairman Address: _______ □ Vice Chairman Address: ______ Director Director □ President □ President □ Vice President □ Vice President □ Secretary Treasurer □ Secretary □ Treasurer □Other □Other _____ Cother_____ 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. Telwas Dil 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.

Edrees Feda

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That Lucrum Realty, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on May 23, 2023;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

June 26, 2023

Bernard J. Logan, Clerk of the Commission