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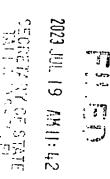
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Special Instructions to F	iling Officer:	
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

(16	able in Florida, enter alternate corporate name ad-		the force in Plenide
Dolaware	·		-
(State or count)	(State or country under the law of which it is incorporated) (FEI number, if applicable)		plicable)
05/21/2022			
(Date of incorporation) 5.		(Date of duration, if other than perpetual)	
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		ly)
100 SE 2nd St., S	Ste. 2000, Miami , FL 33131		
	(Principal office	street address)	
	(Current mailing a	address, if different)	202 SE
N. L.		n vom III.	FORE THE
Name and stree	et address of Florida registered agent: (P.O. I	Box NUI acceptable)	eurs .
Name:	Registered Agents Inc.	<u> </u>	1.7
fice Address:	7901 4th St N, Ste 300		
	St. Petersburg	— 33702	AMII:42
	(City)	, Florida	H D
Danistared on	ent's acceptance:		
	ted as registered agent and to accept service	of process for the above stated	corporation at the pla
	application, I hereby accept the appointment omply with the provisions of all statutes rela		
	with and accept the obligations of my positi		e perjormance of my a
d I am familiai			
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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 Kirill Mishanin ☐ Chairman □ Chairman Name: 51 NW 26th St., #205 ☐ Vice Chairman ☐ Vice Chairman Address: Miami. FL 33127 Director ☐ Director President ☐ President ■Vice President ☐Vice President **■**Secretary ■ Treasurer □ Secretary □Treasurer □Other ______ Other _____ □Other _____ □Other _____ Name: □ Chairman □ Chairman Name: □Vice Chairman Address: ☐ Vice Chairman Address: □ Director □ 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 □Treasurer □ Secretary □ Secretary ☐ Treasurer Other _____ □Other _____ □ Other _____ 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 " : of State Annual Report form. Signature of process of Officer 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. Kirill Mishanin - President

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "INFODRIVER 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 FOURTEENTH DAY OF JULY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INFODRIVER INC."

WAS INCORPORATED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

Authentication: 203748714

Date: 07-14-23

7490520 8300 SR# 20232998389