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COVER LETTER

	stration Section sion of Corporations					
SUBJECT:	HASKELL CORPORATION	LIMITED INC				
			- must include suffix			
Dear Sir or N	fadam:					
"Certificate of	"Application by Foreign Cor of Existence," or "Certificate of need foreign corporation to tra	of Good Stan	ding" and check are sub	ct Business in Florida," emitted to register the		
Please return	all correspondence concerning	ng this matter	to the following:			
JUAN A FIGI	JEROA					
		Name of	Person			
JUAN A FIG	UEROA, PA. CERTIFIED PUB	LIC ACCOUN	TANT			
	· · · · · · · · · · · · · · · · · · ·	Firm/Com	pany			
999 PONCE I	DE LEON BLVD, STE 525					
		Addre	ess			
CORAL GAB	LES, FLORIDA 33134					
		City/State a	nd Zip code	<u> </u>		
CARMEN@J	AFCPA.COM					
	E-mail address:	(to be used f	or future annual report i	notification)		
For further in	nformation concerning this ma	atter, please c	all:			
JUAN A FIGI	JEROA	305	448-5844			
Nan	ne of Person	Area Code		hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration S Division of Co P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a Please make of \$70.00 File	check for the following amounter payable to: FLORIDA DE ling Fee	PARTMENT	OF STATE \$78.75 Filing Fee & Certified 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.

(Enter name of c	RPORATION LIMITED INC. orporation; must include "INCORPORATED orp," "Inc." "Co," or "Corp.")	D," "COMPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)			
		N/A			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)			
4. 01/02/1991	5	5. INDEFINITE			
(Date of incorporation) 08/01/2023		(Date of duration, if other than perpetual)			
	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)			
7. <u>C/O JUAN A FIC</u>	GUEROA PA CPA - 999 PONCE DE LEON	BLVD. STE 525, CORAL GABLES, FL 33134			
	(Principal of	ffice street address)			
8. Name and <u>stree</u> Name: Office Address:	(Current mail et address of Florida registered agent: (P. JUAN A FIGUEROA P.A. CERTIFIED FOR PONCE DE LEON BLVD., STE 525	PUBLIC ALCOUNTANT			
	CORAL GABLES	Florida 33134			
	(City)	(Zip code)			
Having been nam designated in this further agree to c and I am familiar	application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my p	A W			

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	σ			
□ Chairman	Name: FELIPPE ANDRADE FERREIRA BUV	10 □Chairman	Name:	
□Vice Chairman	Address: AL LORENA 1853 APT. 91	□Vice Chairman	Address:	
Director	SAO PAULO, BRAZIL	□Director		
□President	01424007	□President		
□Vice President		□ Vice President		
□Secretary	Treasurer	Secretary		□Treasurer
Other		Other		□Other
□Chairman □Vice Chairman ■Director □President □Vice President □Secretary □Other	Address: AL LORENA 1853 APT, 91 SAO PAULO, BRAZIL 01424007 □Treasurer □Other	Chairman Chairman Vice Chairman Director President Vice President Secretary Other	Address:	☐Treasurer
□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
The officer or direct she is aware that fas. 817.155, F.S.	Use an attachment to report more than six (6). The attachment to report more than six (6). The attachment to the index when filing your Florida Department of Director Signature of Director ctor signing this document (and who is listed in numbalse information submitted in a document to the Department of the Department	or Officer	eport form.	rd herein are true and that he or



Commonwealth of The Bahamas THE INTERNATIONAL BUSINESS COMPANIES ACT 2000

CH. 309 Statute Laws of The Commonwealth of The Bahamas

Certificate of Good Standing

HASKELL CORPORATION LIMITED

(Section 189)

IBC 08

No. 3739 B

I, CAMILLE GOMEZ-JONES, Registrar General of the Commonwealth of The Bahamas,

DO HEREBY CERTIFIES THAT

- as the Company No. 1. The above Company was duly active under the provisions of the International Business Companies Act 2000 Statute Laws of the Commonwealth of The Bahamas on the 2nd day of January, 1991 of the Register of International Business Companies.
- 2. The name of the Company is still on the Register of International Business Companies and the Company has paid all fees, licence fees and penalties due and payable under the provisions of Sections 175 and 194 of the said Act.
- 3. The Company has not submitted Articles of Merger or Consolidation that have not yet been effective.
- 4. The Company has not submitted Articles of Arrangement that has not yet been effective.
- 5. The Company is not in the process of being wound up and dissolved.
- 6. No proceedings have been instituted to strike the name of the Company off the said Register.
- 7. Insofar is evidenced by the documents filed with this Office the Company is in good legal standing. Authentication CodeNUvTIJM9b2eb



Given under my hand and the seal of office at Nassau in the Commonwealth of The Bahamas this 14th day of July, 2023



Registrar General