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(((H230003812353)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC Account Number : I20120000007

: (702)866-2500 Prone : (702)900-2290 Fax Number

> \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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### FOREIGN PROFIT/NONPROFIT CORPORATION

### Preciosa International, Inc.

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# **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBI	Preciosa International, Inc.	
1,5 C,5 E943 .		on - must include suffix
De <b>a</b> r S	ir or Madam:	
Certif		or Authorization to Transact Business in Florida," landing" and check are submitted to register the ness in Florida.
Please	return all correspondence concerning this mat	ter to the following:
	Melanie	e Galero
	Name	of Person
	InCorp Se	rvices, Inc.
	Finu/C	ompany
	3773 Howard Hugh	es Pkwy. Suite 500S
	Ad	dress
	Las Vegas, N	V 89169-6014
	City/State	and Zip code
		rts@incorp.com
	E-mail address: (to be use	d for future annual report notification)
For fur	ther information concerning this matter, pleas	e call:
lelanie G	ialero on behalf of InCorp Services, Inc. at (	800-246-2677
	Name of Person Area C	ode Daytime Telephone 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 r	ed is a check for the following amount: make check payable to: FLORIDA DEPARTME: .00 Filing Fee S78.75 Filing Fee & Certificate of Status	NT OF STATE  \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

11/2/23, 7:06 AM To: +1 850-617-6383 From: +1 702-866-2689 \ Application By Foreign Corporation for Aut Page 3/5 (((Fl23000381235.3)))

## 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.

	ernational, Inc.		
	corporation, must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATIO	Э.,
(If name unavai	lable in Florida, enter alternate corporate name ac	lopted for the purpose of transact	ing business in Florida)
New York	3.		
(State or count	y under the law of which it is incorporated) 3.	(FEI number, if a	ipplicable)
10/16/1991	5		
	s of incorporation) 5.	(Date of duration, if other	r than perpetual)
Upon Registra	ation		
**********************	(Date first transacted business in	Florida, if prior to registration)	P. 5
5646 Milton S	(SEE SECTIONS 507 1501 & 607 150 Street, Suite 327, Dallas, TX 75206	2, F.S., to determine penalty habi	lity)
JO40 MIIION S		· · · · · · · · · · · · · · · · · · ·	······
	(Principal office	street address)	
	(Current mailing	address, if different)	
Name and stre	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name and stre	et address of Florida registered agent: (P.O. InCorp Services, Inc.	Box <u>NOT</u> acceptable)	2023 SE
Name:	<del>-</del>	Box NOT acceptable)	2023 NO Service
Name:	InCorp Services, Inc.  3458 Lakeshore Drive		2023 NOV -
Name:	InCorp Services, Inc.  3458 Lakeshore Drive  Tallahassee		-2
Name:	InCorp Services, Inc.  3458 Lakeshore Drive	  32312	-2
Name: Tice Address: Registered ag	InCorp Services, Inc.  3458 Lakeshore Drive  Tallahassee  (City)		-2 PM 6:
Name: Tice Address: Registered ag aving been nan	InCorp Services, Inc.  3458 Lakeshore Drive  Tallahassee  (City)  ent's acceptance:  ied as registered agent and to accept service	, Florida 32312  (Zip code)  of process for the above state	ed corporation of the pla
Name: Fice Address: Registered ag aving been nan signated in this	InCorp Services, Inc.  3458 Lakeshore Drive  Tallahassee  (City)  ent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointment.	, Florida 32312 (Zip code) of process for the above state out as registered agent and agent	ed corporation of the place to act in this capacit
Name: Tice Address: Registered agaving been nan signated in this rther agree to c	InCorp Services, Inc.  3458 Lakeshore Drive  Tallahassee  (City)  ent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointment omply with the provisions of all statutes releases.	Thorida 32312 (Zip code)  of process for the above state out as registered agent and agative to the proper and complete.	ed corporation of the place to act in this capacit
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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.

# 11/2/23, 7:06 AM To: +1 850-617-6383 From: +1 702-866-2689 \ Application By Foreign Corporation for Aut Page 4/5 (((H230003812353)))

A. DIRECTORS		(((1.125.5000	
□Chainnan	Name: Ludvik Karl Jr.	□ Chairman	Name: Robert Glaser
□Vice Chairman	Address: 5646 Milton Street, Suite 327	☐ Vice Chairman	Address: 5646 Milton Street, Suite 327
□Director	Dallas, TX 75206	Director	Dallas, TX 75206
<b>≣</b> President		□President	
□Vice President		□ Vice President	
ElSecretary	[]Treasurer	□ Secretary	■ Tripasurer
□Other	□Other	□ Other	Oother
□Chainman □Vice Chairman □Director □President □Vice President	Name: Michael Holy  5646 Milton Street, Suite 327  Address: Dallas, TX 75206	☐ Chairman ☐ Vice Chairman ☐ Director ☐ President ☐ Vice President	Name:
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
Other Assistant	Treasurer Other	Other	Odkr
□Chairman □Vice Chairman □Director □President	Name:	□Chainnan □Vice Chairman □Director □President	Name:
□Vice President		□Vice President	
□ Secretary	☐ Treasurer	☐Secretary	☐ Thræsurti
□Other	Other	Other	Other
	Use an attachment to report more than six (6). The attachment to report more than six (6). The attachment to the index when filling your Figure Department.		
12.	Signature of Director	or Officer	
she is aware that fa s.817.155, F.S.	tor signing this document (and who is listed in point) lse information submitted in a document to the Departy, Assistant Treasurer	er II above) affinns th	
.J	(Typed or printed name and capacity of per-	son signing application	)

### STATE OF NEW YORK

#### DEPARTMENT OF STATE

### Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filled in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: PRECIOSA INTERNATIONAL, INC.

DOS ID Number: 1582682

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 10/16/1991

Statement Status: CURRENT Statement Due Date: 10/31/2025

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on October 27, 2023 at 12:33 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hayles

By Brendan C. Hughes Executive Deputy Secretary of State

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