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COVER LETTER

TO:	Division of Corporations					
SUBJ	ECT:	HK Group, Inc.				
., .,	.,,,,,,,	Name o	f corporation	n - mus	t include suffix	
Dear S	ir or M	adam:				
"Certif	ficate of	"Application by Foreign Colf Existence," or "Certificate ced foreign corporation to tra	of Good Star	nding" :	and check are subm	
Please	return :	all correspondence concernit	ng this matte	r to the	following:	
Kennet	h S. Hu	1				
			Name of	Person	1	
HK Gr	oup, Inc					
			Firm/Cor	npany		
P.O. Bo	ox 4116.	38				
		•	Addr	ress		
Melbou	irne, FL	32941				
			City/State a	and Zip	code	
kenhur	t@titanl	lc.net				
		E-mail address:	(to be used	for futu	ire annual report not	tification)
For fur	ther inf	ormation concerning this ma	itter, please	call:		
Susan V	Vasiliadi	s	877	7 681-6730		
	Name	e of Person	Area Coc	le	Daytime Telepho	one Number
	Regist Divisi The C	CET/COURIER ADDRESS tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 tassee, FL 32303	::		MAILING AD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	ction porations
Please r		check for the following amore to the payable to: FLORIDA DE ng Fee \$78.75 Filing Certificate of	PARTMENT Fee & - 5	□ \$78.7		S87.50 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.

HK Group, Inc.				
(Enter name of c	orporation: must include "INCORPORATE orp." "Inc." "Co." or "Corp.")	D," "COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate nan	ne adopted for the purpose of transacting business in Florida)		
Nevada		26-2623502		
(State or countr	y under the law of which it is incorporated)	3. 26-2623502 (FEI number, if applicable)		
3/26/2008		5		
		5. (Date of duration, if other than perpetual)		
		s in Florida, if prior to registration) 7,1502, F.S., to determine penalty liability)		
7. 575 S. Wickham	Road, Suite F #505, Melbourne, FL 32904			
	(Principal c	office street address)		
P.O. Box 411638	. Melbourne, FL 32941	iling address, if different)		
3. Name and <u>stree</u> Name: Office Address:	ct address of Florida registered agent: (I Corporation Services Company 1201 Hays Street	P.O. Box NOT acceptable)		
	Tallahassee	, Florida 32301		
	(City)	(Zip code)		
Having been nam lesignated in this further agree to c ind I am familiar	application, I hereby accept the appoint omply with the provisions of all statute. With and accept the obligations of my find the control of	rvice of process for the above stated corporation at the place attent as registered agent and agree to act in this capacity. It is relative to the proper and complete performance of my dution position as registered agent. Solution as signature) Solution as signature.		

under the law of which it is incorporated.

A. DIRECTORS							
□Chairman	Name: Kenneth S. Hurt	□ Chairman	Name: Kenneth S. Hurt				
□Vice Chairman	P.O. Box 411638 Address:	□Vice Chairman	Address: P.O. Box 411638				
□Director	Melbourne, Fl. 32941	■Director	Melbourne, Fl. 32941				
President		□President					
□ Vice President		□Vice President					
□Secretary	☐ Treasurer	☐ Secretary	□Treasurer				
□Other	□Other	□Other					
□Chairman □Vice Chairman □Director □President	Name: P.O. Box 411638 Address: Melbourne, FL 32941	□Chairman □Vice Chairman □Director □President	Name: P.O. Box 411638 Address: Melbourne, FL 32941				
□Vice President		□Vice President					
☐ Secretary	Treasurer	Secretary	□Treasurer				
□Other	Other	□Other					
□Chairman □Vice Chairman □Director □President	Name:	□Chairman □Vice Chairman □Director □President	Name:Address:				
□Vice President		□Vice President					
☐ Secretary	□Treasurer	☐ Secretary	Treasurer				
□Other	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 Florida Department of State Angual Report form. 12. Signature of Director or 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.

13. Susan Vasiliadis, Secretary

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HK GROUP, INC**, as a DOMESTIC CORPORATION (78) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 03/26/2008, and is in good standing in this state.

Certificate Number: B202312284224992

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 12/28/2023.

FRANCISCO V. AGUILAR Secretary of State