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Division of Corporations

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mariesa.coppola@curiaglobal.com Email Address:\_\_\_\_

## FOREIGN PROFIT/NONPROFIT CORPORATION CURIA NEW YORK, INC

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To:

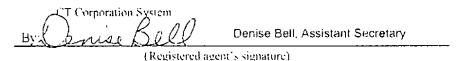
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. Curia New York, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc." "Co." or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (FEI number, if applicable) (State or country under the law of which it is incorporated) 10-29-1999 (Date of incorporation) (Date of duration, if other than perpetual) Upon filing (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  $\frac{1}{7}$  33 Riverside Ave, Rensselaer, New York 12144 (Principal office street address) 26 Corporate Circle, Albany, New York 12203 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable) CT Corporation System Name: 1200 South Pine Island Road Office Address: Plantation

## 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Zip code)



(City)

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			
⊐Chairman	Name:	∃Chairman	Name:
∃Vice Chairman	26 Corporate Circle Address:	∃Vice Chairman	Address: 26 Corporate Circle
<b>■</b> Director	Albany, New York 12203	Director	Albany, New York 12203
∃President		∃President	
T Vice President		T Vice President	
□Secretary	"TTreasurer	■ Secretary	71 reasurer
□Other		□Other	Other
⊐Chairman	Name:	⊒Chairman	Name:
TVice Chairman	Address:	TVice Chairman	Address:
□Director		□Director	
□President		□President	
TiVice President		TIVice President	
□Secretary	□ Freasurer	□Secretary	□Treasurer
□Other		110ther	Other
⊒Chairman	Name:	_IChairman	Name:
	Address:	□Vice Chairman	Address:
□ Director		□ Director	
1President		President	
		T)Vice President	
□ Secretary	TT reasurer	☐ Secretary	Treasurer
□Other		□Other	DOther
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.  12. Signature of Director or Officer			

The officer or director signing this document (and who is listed in number 1) 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 \$.817.155, F.S.

13. Stacic Phillips, Director and Secretary

<sup>(</sup>Typed or printed name and capacity of person signing application)

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CURIA NEW YORK, 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 TWELFTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

at corp.delaware.gov/auth

Authentication: 203003919

Date: 03-12-24