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PICK-UP WAIT MAIL				
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T. LEMIEUX MAR 27 2024

COVER LETTER

Division of Cor Boat Trade	porations 2 & Enterprise Inc.			
SUBJECT:	·	noration	must include suffix	
	name of cor	poration -	must include surfix	
Dear Sir or Madam:				
Certificate of Existence		ood Standi	nthorization to Transact Eng" and check are submit in Florida.	
Please return all corresp tuart Zuckerman	ondence concerning thi	s matter to	the following:	
NCORPORATE247, INC		lame of Pe	rson	
NCONFORM DEFECTION				
049 NW 18th Ave		rm/Compa	nny	
3oca Raton, FL 33486		Address		
ngt@global-inter.net	City	/State and	Zip code	
	E-mail address: (to b	e used for	future annual report noti	fication)
For further information	concerning this matter.	please cal	l :	•
Stuart Zuckerman	30)2	386-3888	
NI CD		rea Code) Daytime Telephor	Normala ca
Name of Person	Α	rea Code	Daytime Telephor	ie Numoer
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		
Enclosed is a check for Please make check payabl □ \$70.00 Filing Fee	the following amount: e to: FLORIDA DEPAR S78.75 Filing Fee Certificate of Stat	& □ 5		■ \$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. Boat Trade & Enterprise Inc. 1. (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) Applied for (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) 1/12/2024 (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 23269 State Rd 7, Ste 119, Boca Raton, FL 33428 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) INCORPORATE247, INC. Name: 949 NW 18th Ave. Office Address: Boca Raton (City) 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. (Registered agent's signature)

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	Januario Dos Reis Gagliardi		Rodrigo Toledo França		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	23269 State Rd 7, Ste 119 Address:	□Vice Chairman	23269 State Rd 7, Ste 119 Address:		
□Director	Boca Raton, FL 33428	□Director	Boca Raton, FL 33428		
□Presidem		President			
■ Vice President		□Vice President			
□Secretary	□Treasurer	□Secretary	□Treasurer		
□Other	□Other	□Other	Other		
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman			
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	□ Secretary	□Treasurer		
Other	Other	□Other	□Other		
			•		
□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		
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. Redrige Toledo Trança 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. Rodrigo Toledo França, President					

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

DELAWARE, DO HEREBY CERTIFY "BOAT TRADE & ENTERPRISE 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 ELEVENTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BOAT TRADE & ENTERPRISE INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF JANUARY,

A.D. 2024.

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

A POR SOLUTION OF THE PROPERTY OF THE PROPERTY

Authentication: 202989802

Date: 03-11-24