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COVER LETTER

TO:		tration Section ion of Corporations						
SHBJ	ECT:	Quicksale Home Re	ealty Inc.					
., 0 1,,,	.,			ion - must	include suffix			
Dear S	Sir or M	adam:						
"Certi	ficate of	"Application by Foreign Existence," or "Certific ced foreign corporation t	ate of Good S	Standing" a	and check are sub			
Please	return :	all correspondence conce	erning this ma	tter to the	following:			
			Ronald (Colquhou	ın			
				of Person			5	202
Quicksale Home Realty Inc.								2 0 0
Firm/Company								
112-33 Hannibal St.								
	Address							2
ST. Albans, NY 11412							<u> </u>	. .
			City/Stat	e and Zip	code			_
			o@quicksal		ealty.com re annual report i	notitiontion)		
			,		re aimuai report i	nonneation)		
For fu	ther inf	formation concerning thi	s matter, pleas	se call:				
	Done	ald Calaubaus	(71 6		5-7472			
		ald Colquhoun e of Person	at (<u>718</u> Area C	/ /	Daytime Telep	hone Number	_	
	Regist Divisi The C	CET/COURIER ADDR tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite			MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7		
Please	ed is a	check for the following a eck payable to: FLORIDA ng Fee	DEPARTME	□ \$78.7	ATE 5 Filing Fee & fied Copy	□ \$87.50 Filii Certificate Certified C	of Status &	

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.

2.	New York (State or country under the law of which it is incorporate	3.	20-5578854		_	
	(State or country under the law of which it is incorporate	d)	(FEI number, if applicable)			
4.	06/1/06	_ 5.	N/A	•	_	
	(Date of incorporation)		(Date of duration, if other than perpetua	l)		
6.	N/A				_	
			Florida, if prior to registration) 02, F.S., to determine penalty liability)			
7			ST. Albans, NY 11412			
/			ce street address)	-	2024	
	P.O. Boy 120327	ST	.Albans, NY 11412		2024 APR 15	-
-	(Current r	nailin	g address, if different)	- : :	・ ズi ー	
				41. ⁵ 4.	ζ.	ļ
8.	Name and street address of Florida registered agent:	(P.C). Box NOT acceptable)		PΗ	
	Name: Amber Laurenceau			크	PM :	
	·			2777	=	
Of	fice Address: 231 Riverside Dr., 506-1					
	_ Holly Hill		Florida 32117			
	(City)		(Zip code)			

(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 Name: Ronald Colquhoun Name: _____ □Chairman □ Chairman □ Vice Chairman Address: 112-33 Hannibal St. Address: ☐ Vice Chairman Director ST. Albans, NY 11412 □ Director President □President ☐ Vice President ☐ Vice President □Treasurer ☐ Treasurer □ Secretary □ Secretary □Other _____ □Other _____ □Other _____ □ Other _____ □ Chairman Name: _____ □Chairman Name: ______ Address: □ Vice Chairman Address: ______ □Vice Chairman □Director □ Director □ President □President □Vice President ☐ Vice President ☐Treasurer_____ □ Secretary □ Treasurer □ Secretary □Other □Other Other_ Name: _____ ☐ Chairman □ Chairman Name: ______ □ Vice Chairman Address: Address: □ Vice Chairman ☐ Director □Director □ President □President □ Vice President □ Vice President □ Secretary ☐Treasurer □ Secretary □ Treasurer □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. 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.

Ronald Colguhoun/President

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

l, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed 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:

QUICKSALE HOME REALTY INC.

DOS ID Number:

3370164

Entity Type:

DOMESTIC BUSINESS CORPORATION

Entity Status:

EXISTING

Date of Initial Filing with DOS:

06/01/2006

Statement Status:

CURRENT

Statement Due Date:

06/30/2024

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 April 09, 2024 at 03:23 P.M.

Brandon C Hydro

ROBERT J. RODRIGUEZ, Secretary of State

By Brendan C. Hughes

Executive Deputy Secretary of State

Authentication Number: 100005518803 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov





March 25, 2024

RONALD COLQUHOUN QUICKSALE HOME REALTY INC. 112-33 HANNIBAL ST. ST. ALBANS, NY 11412

SUBJECT: QUICKSALE HOME REALTY INC.

Ref. Number: W24000047602

We have received your document for QUICKSALE HOME REALTY INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Operations Manager A

Letter Number: 924A00006385

RECEIVED

APR 15 2024