

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240001816583)))



H240001816583ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	To:		
		Division of Corporations	
		Fax Number : (850)617-6383	
	From:		
		Account Name : CAPITOL SERVICES, INC.	·
		Account Number : I20160000017	
		Phone : (855)498-5500	
		Fax Number : (800)432-3622	
29	•*Enter ti	ne email address for this business entity to be used for fur al report mailings. Enter only one email address please.**	ture
12:2	ATCH STOPE STOP STOPE STOPE STOPE STOPE STOPE STOPE STOPE STOPE STOPE STOPE ST	ne email address for this business entity to be used for fur al report mailings. Enter only one email address please.** l Address:	ture
~	ATCH STOPE STOP STOPE STOPE STOPE STOPE STOPE STOPE STOPE STOPE STOPE STOPE ST	al report mailings. Enter only one email address please.**	ture
IN FH 12: 2	TELEVISION OF THE STATE OF THE	al report mailings. Enter only one email address please. •• 1 Address:	tur
H 12: 2	TELEVISION OF THE STATE OF THE	al report mailings. Enter only one email address please.**	tur

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

1.... 2 2 2024

H24000181658

COVER LETTER

	istration Section ision of Corpora				
SUBJECT	iProperty Expr	ess, Inc.			
		Name of corporation	- must include suffix	·	
Dear Sir or	Madam:				
"Certificate	of Existence," o	by Foreign Corporation for r "Certificate of Good Star rporation to transact busine	iding" and check are subr		
Please retur	n all corresponde	ence concerning this matter	r to the following:		
Lori Sudowe					
		Name of	Person		
Coblentz Pat	ch Duffy & Bass I	LLP			
		Firm/Con	mpany		
One Montgo	mery St. Suite 300	0			
******		Addr	ess		
San Francisc	o CA 94104				
	_	City/State a	nd Zip code	·	
LSudowe@c	oblentzlaw.com				
	E	-mail address: (to be used	for future annual report ne	otification)	
For further i	nformation conc	erning this matter, please of	call:		
Lori Sudowe		at (415	677-5274		
Na	ne of Person	Area Cod	e Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
		ollowing amount: FLORIDA DEPARTMENT	OF STATE		
□ \$70.00 F			\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

H24000181658

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.

1. iProperty Expre	ess, Inc.		
(Enter name of c	corporation; must include "INCORPORATED Corp," "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in	n Florida)
2. Delaware	3.		
	ry under the law of which it is incorporated)	(FEI number, if applicable)	
4 May 13 , 2024	4 5.	n/a - perpetual	
(Date	e of incorporation)	(Date of duration, if other than perpetu	
6. ^{n/a}			707
	•	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	202 15.17 2
7 One Montgomer	y St. Suite 3000, San Francisco CA 94104	•	21
	(Principal off	ice street address)	
	(Current maili	ng address, if different)	<u>ب</u> ع. د
8. Name and street	et address of Florida registered agent: (P.	D. Box NOT acceptable)	•
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Taliahassec	. Florida ³²³⁰¹	
	(City)	(Zip code)	

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.

Corporation Service Company By:	Linda J. Snook, Assistant Secretary			
(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.

H24000181658

A. DIRECTORS		•			
□Chairman	Junhai Kan	□Chairman	Name: Quan Chi		
□Vice Chairman	Address:Rd.	□ Vice Chairman	Address: Blackburn VIC 3130		
Director	Blackburn VIC 3130				
President	Australia	President	Australia		
☐Vice President		□Vice President			
☐ Secretary	☐Treasurer	Secretary	☐Treasurer		
□Other		□Other	Other		
□ Chairman □ Vice Chairman □ Director □ President □ Vice President □ Secretary ■ Other CFO	Name: O03/177 Surrey Rd. Address: Blackburn VIC 3130 Australia □Treasurer □Other	☐ Chairman ☐ Vice Chairman ☐ Director ☐ President ☐ Vice President ☐ Secretary ☐ Other	☐ Treasurer		
□Chairman	Name:	□ Chairman	Name:		
∐Vice Chairman	Address:	☐ Vice Chairman	Address:		
Director		□Director			
President		President			
□Vice President		□Vice President			
☐ Secretary	☐ Treasurer	Secretary	☐ Treasurer		
ClOther		□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. 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. Junhai Kan					
(Typed or printed name and capacity of person signing application)					

H24000181658



Page 1

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

DELAMARE, DO HEREBY CERTIFY "IPROPERTY EXPRESS, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAMARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IPROPERTY EXPRESS, INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF MAY, A.D. 2024.

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

3664817 8300
SR# 20242200435
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203492479

Date: 05-16-24