Faymon 40/3

(F	Requestor's Name)			
A)	(ddress)			
A)	Address)			
(0	City/State/Zip/Phone #)			
	WAIT MAIL			
(E	Business Entity Name)			
([Document Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
	Office Use Only			



07/24/24--01004--010 **78.75

RECEIVED



T. LEMIEUX

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Horl Corporation

Name of corporation - must include suffix

Dear Sir or Madam:

. .

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida." "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Christian Burghart			
-	Name of	Person	
Schumann Burghart LLP			
	Firm/Con	apany	
1500 Broadway, Suite 1902			
	Addr	ess	
New York, NY 10036			
	City/State a	nd Zip code	
administration@sbuslaw.cor	1		
	E-mail address: (to be used	for future annual report i	notification)
For further information co	ncerning this matter, please o	call:	
For further information co Christian Burghart		809-2685	
	ncerning this matter, please o at (Area Cod		hone Number
Christian Burghart	at (646 Area Cod IER ADDRESS: on rations ahassee treet. Suite 810	809-2685	ADDRESS: Section orporations 7

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.

** 1.0

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l. Hori Corporatio	n				
	orporation; must include "INCORPORATED." orp." "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATION			
(If name unavail:	ible in Florida, enter alternate corporate name a	dopted for the purpose of transacting	g business in Florida)		
Delaware	3				
(State or countr	y under the law of which it is incorporated)	(FEI number, if app	(FEI number, if applicable)		
12/04/2023					
	of incorporation)	(Date of duration, if other t	(Date of duration, if other than perpetual)		
Ď.					
7. 1500 Broadway, 3	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 Suite 1902, New York, NY 10036		y)		
·	(Principal offic	re <u>street</u> address)			
	(Current mailing	g address, if different)			
8. Name and <u>stree</u>	<u>et address</u> of Florida registered agent: (P.O	. Box <u>NOT</u> acceptable)			
Name:	InCorp Services, Inc.		20		
Office Address:	3458 Lakeshore Drive		2024 JUL 23		
	Tallahassee	. Florida			
	1Cited	(Zin andu)	· . · ·		
	(City) ent's acceptance:				
7. Registered age	ant s acceptance:	and the second face they above atoms			

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 action the 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.



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.



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HORL CORPORATION" 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 NINETEENTH DAY OF JULY, 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 SAID "HORL CORPORATION" WAS INCORPORATED ON THE FOURTH DAY OF DECEMBER, A.D. 2023.

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



Authentication: 203965198 Date: 07-19-24

2710907 8300

SR# 20243183766 You may verify this certificate online at corp.delaware.gov/authver.shtml

4 . .

Chairman	Timo Horl	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	1500 Broadway, Suite 1902 Address:	
Director	New York, NY 10036	Director	New York, NY 10036	
President		□President		
□Vice President		□Vice President		
□Secretary	Treasurer	Secretary	Treasurer	
CEO Other	Other	□Other	□Other	
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		Director		
DPresident		□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		
Decretary	Treasurer	□Secretary		
DOther	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. Mat-Byle

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.