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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 12009000081 : (307)200-2803 Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

.Email Address:\_

## FOREIGN PROFIT/NONPROFIT CORPORATION TV Glass Corp

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## 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.

	orporation; must include "INCORPORATED," orp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in l	Florida)
DE	3.		
	y under the law of which it is incorporated)	(Fi:I number, if applicable)	
11/28/2017	5.	_	
(Date	of incorporation)	(Date of duration, if other than perpetual	1
o			
	(Date first transacted business in ISEE SECTIONS 607 1504 & 607.150	Florida, if prior to registration) 02, F.S., to determine penalty liability)	
, 7901 4th St N	STE 300 St. Petersburg, FL 33702		
		e street address)	24 - JV
7901 4th St f	N STE 300 St. Petersburg, FL 33702	2	Sick Sick
	(Current mailin <sub>g</sub>	g address, if different)	
			00000
. Name and stree	<u>et address</u> of Florida registered agent: (1 <sup>o</sup> O	. Box <u>NOT</u> acceptable)	9. S
Name:	Registered Agents Inc		خ πن
Office Address:	7901 4TH ST N STE 300	<u></u>	ထား ပွဲ
	ST. PETERSBURG	 Florida 33702	
	(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.

(Registered agent's ) ignatures (Registered agent's ) ignatures

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.

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A. DIRECTORS						
El Chairman	Riestra, Jose	T.Chairman	Name:			
CiVice Chairman	Address:	Z Vice Chairman	Address:			
<b>■</b> Director	7901 4th St N STE 300	_Director	7901 4th St	N STE 300		
■President	St. Petersburg, FL 33702	∏. President	St. Petersbu	rg, FL 33702		
□Vice President		□Vice President		<b></b>		
### ##################################	☐ Treasurer	<b>■</b> Secretary		Tigasurer		
ClOther	[10ther	*Other		□Other		
□Chairman	Name:	_Chairman	Name:			
□Vice Chairman	Address:	T. Vice Chairman	Address:			
Director		Onector				
□ President		T.President				
□Vice President		□Vice President				
	☐ Treasurer	☐ Secretary		□ Treasurer		
[[Other		HOther		110ther		
□Chaimian	Name:	L.Chairman	Name:			
پن Vice Chairman	Address:	_Vice Chairman	Address:			
CDuceton	·	Director	<del></del>			
<b>TPresident</b>	· · · ·	I President				
[]Vice President	·	Vice President				
E.Secretary	☐ Treasure:	Secretary		. Theasurer		
_Other	☐ Other	Other	<del> </del>	COther		
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 tiling your Florida Department of State Annual Report form.  12. Jose Piestra  Signature of Director of Office:						

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 its 8.817.185, F.S.

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "TV GLASS CORP" 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 EIGHTH DAY OF AUGUST, 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 "TV GLASS CORP"
WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 2017.

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

at corp gelawate gov/auth

Authentication: 204121492

Date: 08-08-24