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FOREIGN PROFIT/NONPROFIT CORPORATION DANESCOR CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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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.

1	ORPORATION			
	orporation; must include "INCORPORATED," "orp," "Inc." "Co." or "Corp.")	COMPANY," "CORPORATION,"	-, ,	
(If name unavail	able in Florida, enter alternate corporate name add	pted for the purpose of transacting busine	ess in Florida)	
, NY	3			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
4.	5.			
	of incorporation)	(Date of duration, if other than perpetual)		
6.				
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502			
7 SUNRISE HARI	BOR, APT 555, 1040 SEMINOLE DRIVE, FORT	LAUDERDALE, FL 33304		
7.	(Principal office g			
SUNRISE HAR	BOR, APT 555, 1040 SEMINOLE DRIVE, FORT	LAUDERDALE, FL 33304		
	(Current mailing a	ddress, if different)	2024 SEP	
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Name:				
	SUNRISE HARBOR, APT 555, 1040 SEMINO		0	
Office Address:		-	-1:	
	FORT LAUDERDALE.	, Florida	12: 2	
	(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.

/s/John Snead (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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

From: Mark Fuchs

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A. DIRECTORS				
□Chairman	Name: JOHN SNEAD	□ Chairman	Name: FAWZIA MIRZA 450 SOUTH AVE. APT 289 Address: GARWOOD, NJ 07027	
□Vice Chairman	Address:A50 SOUTH AVE, APT 289	□Vice Chairman		
■ Director	GARWOOD, NJ 07027	⊞ 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 □	
□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		
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department (6/10) IN SN	artment of State Annual Re		
12.	/s/ JOHN SN Signature of Direct	ctor or Officer		
The officer or direc	tor signing this document (and who is listed in magnetic information submitted in a document to the D	umber 11 above) affirms the epartment of State constitu		

(Typed or printed name and capacity of person signing application)

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY. 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: DANESCOR CORPORATION

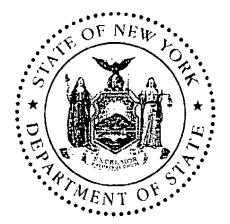
DOS ID Number: 6627035

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 10/28/2022

Statement Status: CURRENT Statement Due Date: 10/31/2024

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 September 24, 2024 at 12:10 P.M.

WALTER T. MOSLEY Secretary of State

Brandon C Heylan

BRENDAN C. HUGHES
Executive Deputy Secretary of State

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