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(Address)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: Registration Section Division of Corporations	
SURJECT: 163 Realty Mant Inc	,
SUBJECT: 163 Realty Mant Zno Name of corporat	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation f "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	tanding" and check are submitted to register the
Please return all correspondence concerning this mat	ter to the following:
Chun-Ying Ch	len
Name	of Person
163Realty	Mgmt Inc
Firm/C	ompany
6410 8th A	ve 3B-2
Ad	dress
Brooklyn., N Eity/Stat	4 11220
Emilychen 15	589@gmail.low
E-mail address: (to be use	a for future annual report nonneation)
For further information concerning this matter, pleas	e call:
Clause Vision Chan	24 124.250
Chun- Ying Chen at (9) Name of Person Area C	ode Daytime Telephone Number
Name of reison Area C	Daytine Vereprone (Varioe)
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810.	P.O. Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32303	Tallalla Socc, 11, 52514
Enclosed is a check for the following amount:	/
Please make check payable to: FLORIDA DEPARTME	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☑ \$87.50 Filing Fee. Certified Copy Certificate of Status &
Continuate of Status	Certified Copy Certified Copy

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.

(Enter name of corpora "Inc.," "Co.," "Corp."	Mamt 200 tion; must include "IN Inc." "Co," or "Corp.")	CORPORATED	." "COMPANY."	` "CORPORATIO	N."	
(If name unavailable in	Othorn Florida, enter alternate	e corporate name	adopted for the p	urpose of transactin	ng business in Flor	rida)
Nai	v Vork	3	92	-1727324		
(State or country unde	er the law of which it is	incorporated)		(FEI number, if ar	oplicable)	
616	12023	5				
(Date of inc	orporation)		(Date o	of duration, if other	than perpetual)	
	10	121/24				
	(Date first tran (SEE SECTIONS 6	sacted business	in Florida, if prior 502, F.S., to deter		ity)	
	11 5th	Ave S	Shalimar	FL32579		
		(Principal of	fice <u>street</u> address	FL32579)	-	 ·
Name and street add		-		ceptable)		
ffice Address:	Chun-Ying (. 11 12 11			2024. 557.	
	Shalimur	•	. Florida	62 3257	9 🔡 🗷	CERTS.
	(City)			(Zip code)	17	-
Registered agent's a	registered agent and	to accept serv	ice of process fo	or the above state	∰ ⊋ d corporati on at	i i i thè Pja
esignated in this appli urther agree to comply nd I am familiar with	with the provisions	of all statutes .	relative to the pi	oper and comple	ee to act innhis o te performance	capacity of my d
	E					
	/2					

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

under the law of which it is incorporated.

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

A. DIRECTORS				
□Chairman	Name: Chun-Ying Chen (President)	□Chairman	Name:	
☐Vice Chairman	Address. 6410 8th Avenue	□Vice Chairman	Address:	
□Director	Brooklyn, NY 11220	□Director		
■President		President		
□Vice President		□Vice President		
12Secretary	[]Treasurer	☐ Secretary		□Treasurer
COther	ClOther		 	[]Other
□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other N/A	N/A Name: N/A Address: N/A N/A N/A N/A CTreasuret N/A CJOther	□Chairman □Vice Chairman □Director □President □Vice President □Secretary □Other	N/A N/A	☐Treasurer ☐Other N/A
[_Chairman	Name: N/A	⊞Chairman	N/A	
	N/A Address			
Director د المالی	N/A	☐ Director	N/A	
CPresident	N/A	□ President	N/A	
ElVice President	N/A	∐Vice President	N/A	
ElSecretary NA	OTreasurei N/A Other	ElSecretary N A LiOther		□Treasurer N/A □Other
Important Notice; midividuals may be 12 The officer or direct	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department (2). Signature of Director of the signing this document (and who is listed in number lise information submitted in a document to the Department.	hment will be image it of State Annual Re 'Officer 11 above) affirms th	d for reporting purport form.	herein are true and that he or
S.817,155, F.S.	Chun-Ying (_	

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: 163REALTY MGMT INC.

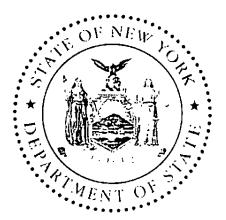
DOS ID Number: 6868690

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 06-06-2023

Statement Status: CURRENT Statement Due Date: 06.30/2025

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 October 24, 2024 at 01:19 P.M.

WALTER T MOSLEY Secretary of State

Brandon C Higher

BRENDAN C. HUGHES
Executive Deputy Secretary of State

Authentication Number: 100006817459 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ccorp.dos.ny.gov

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: 163 Realty Mgmt Zi Name of corpora	14	
	Name of corpora	ation - must include suffix	
Dear S	ir or Madam:		
"Certif	closed "Application by Foreign Corporation icate of Existence," or "Certificate of Good referenced foreign corporation to transact but	Standing" and check are subm	
Please	return all correspondence concerning this m	atter to the following:	
	Chun-Ying C	illy c of Person	· · ·
	163Realtr	1 Mgmt Inc	
	6410 8th 1	Ave 3B-2	·
	Brooklyn. 1 Eity/Ste	VY 11220 Ate and Zip code	
		589@gmail.com sed for future annual report no	tification)
For fur	ther information concerning this matter, plea	ase call:	
(Name of Person at Area	Code Daytime Telepho	ne Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING AD Registration Sec Division of Corp P.O. Box 6327 Tallahassec, FL	ction corations
Please n	ed is a check for the following amount: nake check payable to: FLORIDA DEPARTM: .00 Filing Fec	ENT OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

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.

(Enter name of an	11.0	241°				· · · · · · · · · · · · · · ·		
"Inc " "Co " "Co	Ity Mamt rporation: must incl rp," "Inc." "Co," or	ude "INCOI	RPORA?	TED," "CON	1PANY," "C	ORPORATION,	רי	
men, 00n, 00	.p,e. 00, or	Corp.)						
	Octhorn							
(If name unavailal	ble in Florida, enter	alternate co	rporate n	ame adopted	for the purpo	ose of transacting	business in Flo	orida)
2.	New York			3.	93-1	72 7324		
(State or country	under the law of w	hich it is inc	corporate	d)	(F)	El number, if appl	icable)	
4 <i>\</i>	of incorporation)			5				
(Date o	of incorporation)				(Date of du	ration, if other th	an perpetual)	
5		10 2	1/24					_
	(Date	first transact	ted busin	ess in Florid:	i, if prior to r i, to determin	egistration) e penalty liability)	
7	_ 11	5th	Ave	Shalin	iar FL	32579		
		1	(Principa	l office <u>stree</u>	<u>t</u> address)	,		
	-	((Current n	railing addre	ss, if differen	1)		
 Name and stroot 	addrage at Florid	a registered	d agent:	(PO Box	MOT	able)		
5. Ivanic and <u>Succi</u>	address of Florida		U	(1.0. DOX	<u>ivor</u> accep	uoic)		
Name:	<u>Chun – Y</u>	ing Ch	<u>p.v1</u>	(1.0. Dox	<u>ino i</u> accep	aoic)	202	
Name:	<u>Chun - Y</u>	ing Ch	D_11	(1.0. Dox	<u>NOT</u> accep	:: :	2024 JA	أنكت
Name:	Chun - 4	ing Ch Ave	D_11	(1.0. box	NOT accep	mole)	2024 JAN I	
Name:	Chun - 4 11 5th Sha	ing Ch Ave limar	<u>D</u> .v1	, , ,	Florida	32579	2024 JAN 17 1 Section 17 1	
Name:	Chun - 4 11 5th Sha	Ave Limar (City)	D.11		NOT accep Florida <u>k</u> (Zi	32579, p code)	SECULTAN 17 PH	
Name: Office Address: P. Registered ager	Chun - M Chun - M Sha nt's acceptance:	Ave limar (City)	<u>p</u> n	,	Florida(Zi	2 32579; p code)	SEALER TO THE STATE	TIED
Name: Office Address: O. Registered agen Having been name	Chur - M Chur - M Sha It's acceptance: and as registered ag	Ave limar (City) ent and to	accept s	service of prointment as	Floridak Cocess for the registered of	p code) e above stated of the state of the	2024 JAN 17 PH 2: 20 no act in this	Ti Ti O t the place
8. Name and street Name: Office Address: 9. Registered ages Having been name designated in this a further agree to col and I am familiar i	Chur - M Chur - M Sha It's acceptance: ad as registered agraphication, I here mply with the pro- with and accept the	AVE Limay (City) Tent and to the state of the colligations of the colligations.	accept s the appo all statu	service of properties relative by position a	Florida (Zi cocess for the registered of to the property s registered	p code) e above stated of agent and agree and complete	2024 JAN 17 PH 2: Corporation act in this performance	the place capacity.
Name: Office Address: 9. Registered ages Having been name designated in this a further agree to co	Chun - M Chun - M Sha This acceptance: ad as registered agraphication, I here mply with the pro with and accept the	AVE Limur (City) Tent and to the sistens of the obligation	accept s the appe all statu ons of m	service of pi pintment as tes relative by position a	Floridak cocess for the registered of the propersistered of	p code) e above stated of gent and agree agent.	2024 JAN 17 PH 2: corporation a to act in this performance	of my du
Name: Office Address: Office Address: Registered ages Having been name designated in this a further agree to co	Chur - M Chur - M Sha It's acceptance: ad as registered agrapplication, I here mply with the pro with and accept the	Ave Limur (City) ent and to eby accept visions of the obligation	accept s the appo all statu	service of prointment as tes relative y position a	Florida (Zi cocess for the registered of to the prope s registered	p code) e above stated of agent and agree agent.	2024 JAN 17 PH 2: Porporation a to act in this performance	of my du

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UVice Chairman	Address: 6410 8th Avenue	Vice Chairman	Address:	
□Director	Brooklyn, NY 11220	(ID)rector	* *********	
■President		President	**** * ;= ;= ;= ;= ;= ;= ;= ;= ;= ;= ;= ;= ;=	
CVice President		□Vice President		
USceretary	(i) Trensurer	OSecretary		□Treasurer
L.Other	ClOther	_10ther		ElOther
⊖ Chairman	Name: N/A	□Chairman	NoA Name:	maker to a visionamental armane or hadown 1 red armad reported in \$4.5 to \$1.5
	N/A Address:	LIVice Charman		
E.,Director	N/A	□Director	N/A	
L:President	N/A	⊈!Presideni	N/A	
![Vice President	N/A	□Vice President	N/A	
LiSecretary	LiTreusurer	USceretary		□Treasurer
⊞Other	Clother	⊖Other N/A		ClOther N/A
!_Chairman	Name:	J Chairman	N/A	·····
	N/A Address:	∴Vice Chairman		
a Vice Chairman	N/A	∴Director	N/A	
El President	N/A			
LaVice President	N/A	UVice President	N: A	
USecretary	L)Treasurer	DiSecretary		UTreasurer
S/A SuOther S	N/A Littither	Dother 2 2		LOther
	ise an affachment to report more than six (6). The attactadded to the index when filing your Florida Department	•		rposes only. Non-indexed
12.	Signature of Director o			******
she is aware that fa	tor signing this document (and who is listed in number lise information submitted in a document to the Depart			
s.817.155, F.S.	Chun-Ying (Chen		

STATE OF NEW YORK

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Brandon C. Hughes

WALTER T. MOSLEY Secretary of State

BRENDAN C. HUGHES Executive Deputy Secretary of State

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