M2400001063

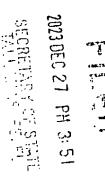
(Requestor's Name)						
(Address)						
(Addiess)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



300420922103

12/28/23--01024--004 **70.00



COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	FCT.	TAOMORE SUPPLY CHAIN LTD C	orp		
3000		Name of	corporation	- must include suffix	
Dear S	ir or M	adam:			
"Certif	icate o	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	Good Stan	ding" and check are subm	
Please	return .	all correspondence concerning	this matter	to the following:	
Luguan	Yan				
			Name of	Person	
Jiahua	US Ac	counting Services, Corp.			
			Firm/Com	pany	
15321	S Dixi	e Hwy, Ste 302			
			Addre	ess	
Palmet	to Bay	. FL 33157			
		(City/State a	nd Zip code	
info@j	haccou	nting.org			
`		E-mail address: (to be used t	or future annual report no	tification)
For fur	ther in	ormation concerning this matter	er, please c	all:	
Alice Qi		at	786	250-3999	
	Name	e of Person	Area Cod	e Daytime Telepho	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ction porations
	nake ch	check for the following amour eck payable to: FLORIDA DEP ng Fee	ARTMENT	OF STATE S78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certificate of Status & Certified Copy

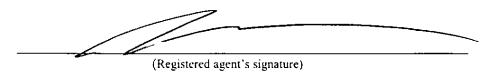
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. TAOMORE SU	TAOMORE SUPPLY CHAIN LTD Corp					
	of corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"				
TAOMORE SU	UPPLY CHAIN LTD					
(If name una	available in Florida, enter alternate corporate name a	idopted for the purpose of transacting b	usiness in Florida)			
2. California	rnia 82-5150557					
	ountry under the law of which it is incorporated)	(FEI number, if applicable)				
4. 04/10/2018	8					
(Date of incorporation)	(Date of duration, if other than perpetual)				
6.						
-	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)	<u>.</u>			
7 15321 S Dix	xie Hwy, Ste 302, Palmetto Bay, FL 33157					
· ·	(Principal offic	ce <u>street</u> address)	_			
15321 S Di	xie Hwy, Ste 302, Palmetto Bay, FL 33157					
	(Current mailin	g address, if different)				
8. Name and Name	street address of Florida registered agent: (P.O. E: Jiahua US Accounting Services, Corp.	<u> </u>	2023 DEC 27 SECRETAR			
Office Addres	15321 S Dixie Hwy, Stc 302					
	Palmetto Bay	Florida <u>33157</u>	PH 3: 5			
	(City)	(Zip code)	汽점 5			

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.



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.

A. DIRECTORS Huihui Dong Name: ______ □ Chairman □ Chairman 1792 Morning Terrace Dr. □Vice Chairman Address: ☐ Vice Chairman Address: Chino Hills, CA 91709 □Director Director President □President ☐ Vice President _____ ☐ Vice President ☐ Secretary Treasurer □Treasurer ☐ Secretary □Other _____ □Other _____ Other_____ □Other _____ Name: ____ □Chairman Name: □ Chairman □Vice Chairman Address: ______ □ Vice Chairman Address: □Director Director □ President □President □Vice President __ ☐ Vice President □ Secretary ☐Treasurer ☐ Secretary □ Treasurer □Other ____ □Other _____ Other _____ Chairman Name: □ Chairman Name: □Vice Chairman Address: ☐ Vice Chairman Address: □ Director □ Director □ President President ☐ Vice President __ ☐ Vice President ☐ Secretary ☐Treasurer □Treasurer □ Secretary □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. 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. Huihui Dong



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name:

TAOMORE SUPPLY CHAIN LTD

Entity No.:

4134953

Registration Date: 04/10/2018

Entity Type:

Stock Corporation - CA - General

Formed In:

CALIFORNIA

Status:

Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 08, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 157839432

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.