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### **CT CORP**

### (850)656-4724 3458 Lakeshore Drive, Tallahassee, FL 32312

D	ate:	(	08/09/2023	
			Acc#I20160000072	- 4: DW
Name:	Electric	Youth	n Inc	
Document #:				
Order #:	150695	76		
Certified Copy of Arts & Amend: Plain Copy:		<u> </u>	-	
Certificate of Good Standing:				
Certified Copy of				
Apostille/Notarial Certification:			Country of Destination:  Number of Certs:	
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Thank you!

78.75

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Ref#

## 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. Electric Youth	lnc.  corporation: must include "INCORPOR	RATED " "COMPA	NY " "CORPORATIO	)N."	•
	Corp.," "Inc.," "Co," or "Corp.")	(1111), (011)	iiii		
(If name unava	ilable in Florida, enter alternate corpora	te name adopted for	the purpose of transact	ing business in Florida)	•
Delaware		3. 92-060442	3. 92-0604424 (FEI number, if applicable)		
(State or coun	arry under the law of which it is incorpor	rated)	(FEI number, if a	applicable)	
September 2, 2	2022	5			_
(Da	(Date of incorporation)		5. (Date of duration, if other than perpetual)		
6. September 2, 1			<del></del>		_
	(Date first transacted by (SEE SECTIONS 607.150)	usiness in Florida. if & 607.1502, F.S., to	prior to registration) determine penalty liab	ility)	
7 1199 S. Federal	Hwy, #356, Boca Raton, FL 33432		<u> </u>		_
··	(Prin	cipal office street a	ddress)		
<del></del> -	(Curre	nt mailing address.	if different)	023	
		. (D.O. D. N.)	NT Ll-V	2023 AUG - 9	
8. Name and str	reet address of Florida registered age	nt: (P.O. BOX <u>int</u>	<u>Fi</u> acceptable)		子学を
Name:	C T Corporation System	<del>-</del>		grafia	
Office Address:	1200 South Pine Island Road			PH 5	Ç.
Office Address.	Plantation		33324	25: <b>61</b>	
	(City)	· · · ·	(Zip code)		
Having been na designated in th	igent's acceptance: imed as registered agent and to accept is application, I hereby accept the o	ippointment as re	gistered agent and ag	gree to act in this capa	icity. T
further agree to and I am famili	comply with the provisions of all so ar with and accept the obligations of	of my position as i	registered agent.	iew perjormance of m	y annes
	C T Corporation System				
	By: Kathryn Widdoes - Assistant!	Secretary	<u> </u>		
		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]:

### DocuSign Envelope ID: 29B4D00F-7FB8-4154-AE5A-4F01A32DCC48

#### A. DIRECTORS

□ Chairman	Name: Michelle Cordeiro Grant	□ Chairman	Name: Jason Cohen
□ Vice Chairman	Address: 1199 S. Federal Hwy #356	□Vice Chairman	Address: 1199 S. Federal Hwy #356
□NDirector	Boca Raton, FL 33532	<b>∑</b> Director	Boca Raton, FL 33532
□President		□President	
		□Vice President	
☐XSecretary	[XTreasurer	□Secretary	□Treasurer
□Other	□Other	□Other	□Other
□Chairman	Name: Yossi Nasser	□Chairman	Name:
□Vice Chairman	Address: 1199 S. Federal Hwy #356	□Vice Chairman	Address:
□Director	Boca Raton, FL 33532	□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		□Othertachment will be image ment of State Annual R	☐Other

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.

13. Michelle Cordeiro Grant

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



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

DELAWARE, DO HEREBY CERTIFY "ELECTRIC YOUTH INC." 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 NINTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

Authentication: 203924899

Date: 08-09-23