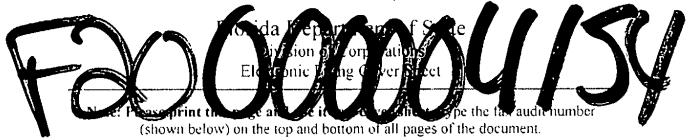
9/24/2020

Division of Corporations



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FOREIGN PROFIT/NONPROFIT CORPORATION

Inzio, Inc.

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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,"	
Al'manne macait	able in Florida, enter alternate corporate name a	danted for the rownesse of transaction	business in Florida)
Delaware	·		
(State or county	y under the law of which it is incorporated)	(FEI number, if applicable)	
August 28, 2020	1		
-	55.	(Date of duration, if other th	un manageral l
	•	(Date of duration, it office the	an perpetuar,
September 1, 20	· · ·	Elected (Connected and agree)	
	(Date first transacted business in (SEE SECTIONS 607,1501 & 607,150)
1771 Bayon Blvd	., Suite 276, Pensacola, FL 32503		
		e street address)	
	(Current mailing	and decorated at 60 and 100	
	(2.0.1.2.11.11.11.2.1.2.1.2.1.2.1.2.1.2.1	address, it different)	
	(Cartin mining	address, it differently	
Name and stree	et address of Florida registered agent: (P.O.	,	
	•	,	, , , , , , , , , , , , , , , , , ,
Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. David Fries	,	··· (***
Name:	et address of Florida registered agent: (P.O.	,	
Name:	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276	Box <u>NOT</u> acceptable)	
Name:	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276	,	
Name: Mice Address:	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276 Pensacola (City)	Box NOT acceptable) Florida 32503	
Name: ffice Address: Registered ag	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276 Pensacola (City) ent's acceptance:	Box NOT acceptable) Florida 32503 (Zip code)	corneration at the
Name: fice Address: Registered agaving been name	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276 Pensacola (City) ent's acceptance: ned as registered agent and to accept service.	Box NOT acceptable) Florida 32503 (Zip code) e of process for the above stated in	
Name: Tice Address: Registered agiving been namesignated in this	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276 Pensacola (City) ent's acceptance:	Box NOT acceptable) Florida 32503 (Zip code) e of process for the above stated is ent as registered agent and agree	to act in this capa
Name: ffice Address: Registered aguving been namesignated in this rther agree to c	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276 Pensacola (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointment.	Box NOT acceptable) Florida 32503 (Zip code) e of process for the above stated is ent as registered agent and agree lative to the proper and complete	to act in this capa
Name: ffice Address: Registered aguving been namesignated in this rther agree to c	et address of Florida registered agent: (P.O. David Fries 4771 Bayou Blvd., Suite 276 Pensacola (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointmentally with the provisions of all statutes re-	Box NOT acceptable) Florida 32503 (Zip code) e of process for the above stated is ent as registered agent and agree lative to the proper and complete	to act in this capa
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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]:

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A. DIRECTORS							
□Chairman	Name. Trevor Turner, MD	□ Chairman	Name: David Fries				
□Vice Chauman	Address	□Vice Chairman	Address 4771 Bayou Blvd., Suite 276				
■Director	Suite 540	Director	Pensacola, FL 32503				
■ President	Peachtree City, GA 30269	□President					
□Vice President		∏Vice President					
☐Secretary	■ Treasurer	■ Secretary	DTreasurer				
□Other	Other	CEO CEO	□Other				
□Chairman	Name	□ Chairman	Name,				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		Director					
□President		□President					
□Vice President		□Vice President					
□ Secretary	∃Treasurer	☐ Secretary	∃Treasmer				
☐0ther	Other	□Other	Other				
□Chairman	Name:	□ Chairman	Name:				
	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		∐President					
		∏Vice President					
□Secretary		□Secretary	Threasurer				
☐0thei		Other	□Other				
individuals may be	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Departmen	nt of State Annual Re					
12. Durch FALLS	Signature of Director of	Officer					
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 \$.817.155, F.S. David Fries, Chief Executive Officer							
13. (Typical or pointed game and gasseits of person signing analization)							



Page 1

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

DELAWARE, DO HEREBY CERTIFY "INZIO, 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 FIRST DAY OF SEPTEMBER, A.D. 2020.

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

Authentication: 203577995

Date: 09-01-20