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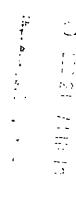
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Special Instructions to Filing Officer:		
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Emerald Mountain Inc	
	tion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good sabove referenced foreign corporation to transact but	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
	of Person
Emerald Mountain Inc	
Firm/C	Company
580 Village Blvd #110	
A	ddress
West Palm Beach, FI 33409	
City/Sta	te and Zip code
amsinnott@dbmscpa.com	
E-mail address; (to be us	ed for future annual report notification)
For further information concerning this matter, plea	se call:
Page Leidy at (_Q	7 696-3235 Code Daytime Telephone Number
Name of Person Area 0	Code Daytime Telephone 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
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMI \$70.00 Filing Fee \$\Bigcup \$78.75 Filing Fee & Certificate of Status	ENT OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy 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.

_{1.} Emerald N	Mountain Inc			
	orporation; must include "INCORPORATED, orp." "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORATIO	N,"	
Em Mtn Ir	nc			
(If name unavaila	ible in Florida, enter alternate corporate name	adopted for the purpose of transaction	ng business	in Florida)
2. North Car	olina 3.	₃ 56-1875331		
	y under the law of which it is incorporated)	(FEI number, if ap	pplicable)	
4.	HZ1/1994 5.			
	of incorporation)	(Date of duration, if other	than perpet	ual)
6.				
_{7.} 580 Village	(Date first transacted business in (SEE SECTIONS 607.150) & 607.150) & Blvd #110 West Palm Bea	• •	ity)	
· · · · · · · · · · · · · · · · · · ·	(Principal off	ice <u>street</u> address)		,
				. , د ،
	(Current mailir	ng address, if different)	11-	
8. Name and stree	<u>t address</u> of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	!	. ; >>>
Name:	April Sinnott			-; .
Office Address:	580 Village Blvd #110		'n	
	West Palm Beach	Florida 33409	•	<u> </u>
	(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.

April Mey Simutt
(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.

A. DIRECTORS			
□Chairman	Name: Page Leidy	Chairman	Name: Carter Leidy
□Vice Chairman	Address: 580 Village Blvd #110	□Vice Chairman	Address: 221 Osceola Way
□Director	West Palm Beach, FI 33409	□Director	Palm Beach FL 33480
■ President		□President	
□Vice President		■Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	□Other	Other	Other
□ Chairman	Name: Frances A Leidy	Chairman	Name: Frances H Leidy
□Vice Chairman	Address: 3800 Washington Rd #901	□Vice Chairman	Address: 1145 W Strasburg Rd
Director	West Palm Beach FI 33405	☐ Director	West Chester, Pa 19380
□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
Important Notice: individuals may be 12.	Use an attachment to report more than six (6). The at added to the index when filing your Florida Departr	ment of State Annual Re	d for reporting purposes only. Non-indexed sport 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.



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

EMERALD MOUNTAIN, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 21st day of April, 1994, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 11th day of December, 2020.

Elaine J. Marshall

Secretary of State