F21000000432

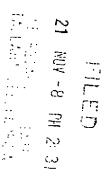
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Office Use Only



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T. LEMIEUX NOV 3 0 2021

COVER LETTER

TO: Amendment Section Division of Corporations	•	
SUBJECT:		
	Name of Corporation	
DOCUMENT NUMBER: F21000000432		
The enclosed Affidavit by Foreign Corporat submitted for filing.	tion to Change/Add Officer(s) and/or Director(s) and fee are	
Please return all correspondence concerning	this matter to the following:	
Graham Norris		
Name of Contact Person		
Norris Law Group, PC		
Firm/Company		
1156 S. State Street, Suite 204		
Address		
Orem. UT 84097		
City/State and Zip Code		
graham@norrislawyer.com		
E-mail address: (to be used for future annua	al report notification)	
For further information concerning this matte	er, please call:	
Graham Norris	801 932-1238	
Name of Contact Person	at () Area Code & Daytime Telephone Number	
Enclosed is a check made payable to the Flor	rida Department of State for the following amount:	
■\$35,00 Filing Fee □ \$43,75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)	
Mailing Address: Amendment Section	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification)

2. This entity was authorized to transact bus number is F21000000432	siness in Florida on 1/19/2021 and its Florida docume
3. This corporation was formed under the law	ws of Wyoming
4. The name and address of each officer and	Nor director is as follows:
<u>Title:</u> Director	Name and Address Brian Ansell
	1382 Mohegan Terr. SE
	Palm Bay, FL 32909
Director	Graham Norris
	1156 S. State Street, Suite 204
	Orem, UT 84097
	<u> </u>
(Attach additi	ional pages if necessary)
22/ /hom5	Director Title of person signing
nature of an officer or director	

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations PO Box 6327 Tallahassee, FL 32314

CR2E127 (8/08)

Typed or printed name of person signing