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(Req	uestor's Name)	<del></del>
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## COVER LETTER

TO: Registration Section Division of Corporations			ý.
SUBJECT: Sync Energy, Inc.			
?	Name of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Forei "Certificate of Existence," or "Certificate of Existence,"	ificate of Good Standi	ing" and check are submi	
Please return all correspondence cor	ncerning this matter to	o the following:	202
Mary E Heineman			
	Name of Pe	erson	1
Sync Energy, Inc.			
	Firm/Comp	any	1 11 -45
28 Shingle Lane			
	Addres		
Inlet Beach, FL 32461			
	City/State and	l Zip code	
mheineman@syncenergy.com			
E-mail ac	ddress: (to be used for	r future annual report not	ification)
For further information concerning	this matter, please cal	ł:	
Mary E Heineman	630 at (	248-8507	
Name of Person	Area Code	Daytime Telephoi	ne Number
STREET COURIER ADE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Sui Tallahassee, FL 32303		MAILING ADI Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations
Enclosed is a check for the followin Please make check payable to: FLORII \$70.00 Filing Fee \$78.75 Certifi	DA DEPARTMENT C Filmg Fee &		S87.50 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.

	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp ")	"COMPANY," "CORPORATION,"		
It usus unsual	ship of Placid	6. 4		
	able in Florida, enter alternate corporate name ad		ness in ric	9110a)
Illinois		6-0562918		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
1/3/2006	5			
(Date	of incorporation)	(Date of duration, if other than pe	erpetual)	~
1/4/2021				2021
	(Date first transacted business in F	lorida, if prior to registration)		=.:
8 Shingle Lane,	(Date first transacted business in F (SEE SECTIONS 607 1501 & 507 1502 Inlet Beach, FL 32461 (Principal office	, F.S., to determine penalty liability)		MAI + IPH
8 Shingle Lane,	(SEE SECTIONS 607 1501 & 607 1502 Inlet Beach, FL 32461 (Principal office	, F.S., to determine penalty liability)	(A)	47.
	(SEE SECTIONS 607 1501 & 607 1502 Inlet Beach, FL 32461 (Principal office	street address) address, if different)	(A)	-4 PH 3
	(SEE SECTIONS 607 1501 & 507 1502 Inlet Beach, FL 32461  (Principal office  (Current mailing :	street address) address, if different)	(A)	-4 PH 3
Name and <u>stree</u>	(SEE SECTIONS 607 1501 & 507 1502 Inlet Beach, FL 32461  (Principal office  (Current mailing and address of Florida registered agent) (P.O. 1	street address) address, if different)	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	-4 PH 3
Name and <u>stree</u> Name:	(SEE SECTIONS 607 1501 & 607 1502 Inlet Beach, FL 32461  (Principal office  (Current mailing and address of Florida registered agent) (P.O. 1  Mary E Heineman)	street address) address, if different)	(A)	-4 PH 3

#### 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. Thereby 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.

Mary E. Henreman (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: Daniel C. Heineman	□Chairman	Name: Mary E. Heineman		
[ ]Vice Chairman	Address: 28 Shingle Lane	"IVice Chairman	Address: 28 Shingle Lane		
(JDn ector	Inlet Beach, FL 32461	. lDuector	Inlet Beach, FL 32461		
President		□ President			
l Wice President	· -	Wice President			
IDSecretary	! ITteasuret	■ Secretary	■ Treasurer		
FlOther	_ DOther	Other			
□Chairman	Name:	⊒Chairman	Name:		
[7Vice Chairman	Address	□Vice Chairman	Address 2	<u>-</u>	
[]Duector		Duector		. <u>1</u> 	
□President		□President	4: 1		
l Wice President		<sup>1</sup> Wice President	, , , ,		
□Secretary	□Treasurer	□Secretary	Treasurer (2)		
⊡Other		□Other			
□Chairman	Name	.⊐Chairman	Name:		
I IV:ce Chairman	Address	/Vice Chairman	Address		
[ ]Director	* *************************************	□Duector		. <u>.</u>	
iDPresident		□President			
∐Vice President		. Nice President			
∐Secretary	□Treasurer	<u>USecretary</u>	⊥Treasurer		
L)Other	i lOther	<b>P</b> Other	. 10ther		
individuals may be	Jse an attachment to report more than six (6). The attac added to the index when filing your Florida Department	it of State Annual Re	eport form	đ	
1- Jary	E. Heineman Signature of Director of	Officer		—	
The officer or dues	for signing this document (and who is listed in number lise information submitted in a document to the Departm	11 above) affums th	nat the facts stated herein are true and that h	he or n	

Mary E. Heineman Secretary / Treasurer

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



### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

SYNC ENERGY, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 03, 2006, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 2ND

day of MARCH A.D. 2021

Authentication #: 2106101676 verifiable until 03/02/2022
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE