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COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	ECT: Evatec NA.	inc.					
		Name of corp	oration -	must include suffix	· · · · ·		
Dear S	ir or Madam:						
"Certif	icate of Existence,"		od Standi	ng" and check are subi	et Business in Florida." mitted to register the		
Please	return all correspor	dence concerning this	matter to	the following:			
Meagh	an Gwinn						
		N	ame of Pe	rson			
RALS,	LLC						
		Fir	m/Compa	iny			
1013 C	entre Rd Ste 403S						
			Address				
Wilmin	gton, DE 19805						
		City	State and	Zip code			
secretai	ry@hr-ny.com						
		E-mail address: (to be	e used for	future annual report n	otification)		
For fur	ther information co	ncerning this matter. [olease cal	l :			
Meagha	an Gwinn	at (<u>800</u>) <u>400-6650</u>					
	Name of Person	Ar	ea Code	Daytime Teleph	none 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			
Please r	nake check payable to	e following amount: b: FLORIDA DEPART \$78.75 Filing Fee of Certificate of State	& 🗆 S	OF STATE 878.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee. Certificate of Status & Certified Copy		

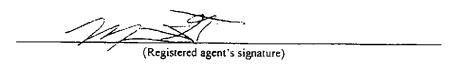
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

Evatec NA, Inc		201/2 121/2 (2012)		
"Inc" "Co.," "(corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	•	
(If name unavai	lable in Florida, enter alternate corporate name adop	oted for the purpose of transacting	business in Florida)	
New Hampshir	e 3.			
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)		
07/04/2004				
(Date	e of incorporation)	(Date of duration, if other than perpetual)		
	02-03-2015			
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,)	
13577 Feather Se	ound Drive, Suite 300, Clearwater, FL, 33762			
	(Principal office s	reet address)	· -	
	(Current mailing ad	dress, if different)	70/21	
Name and stre	et address of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	APR	
Name:	Registered Agents Legal Services,	LLC	t -	
77 A J.J	455 Off Div. D	•		
ffice Address:	155 Office Plaza Drive, Suite A	-	့ ယူ	
		, Florida <u>32301</u>	. 5	
	(City)	(Zip code)	9	

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.



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: HELFRIED WEINLERL	□ Chairman	Name: DAN PACE					
□Vice Chairman	Address: EVATEC NA INC	□Vice Chairman	Address BURTEC NA INC					
≰ Director	13577 Feather Sound Or.	⊠ Director	13577 Feather Sound Dr.					
□President	Clearwater, FL-33162	⊠ President	Georwaler, FL-35762					
□ Vice President		□Vice President						
⊠ Secretary	I X Treasurer	□ Secretary	□Treasurer					
Other	□Other	□Other	Other					
□Chairman	Name: ANOREAS WAELT	□Chairman	Name: PETER LIPPUNER					
☐ Vice Chairman	Address: EVATECAG	□Vice Chaiπnan	Address: EVATECA6					
E Director	Hauptstrasse la	又 Director	tauptskasse la					
□President	CH-9477 Trabbach	□President	CH-9477 Trübbach					
□Vice President		□Vice President						
☐ Secretary	□Treasurer	□ Secretary	□Treasurer					
□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: Use an attachment to repare more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.								
Signature of Director or 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 s.817.155, F.S.								

13. Helfried Weinzerl, Secretary

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



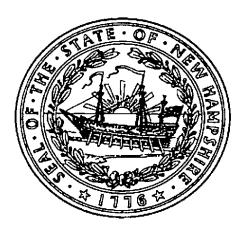
State of New Hampshire Department of State

CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that EVATEC NA, INC, is a New Hampshire Profit Corporation registered to transact business in New Hampshire on July 01, 2004. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 480267

Certificate Number: 0005274580



IN TESTIMONY WHEREOF.

I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 2nd day of March A.D. 2021.

William M. Gardner Secretary of State