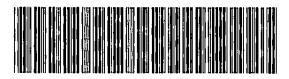
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COVER LETTER

	egistration Section ivision of Corporations					
SUBJEC	Ocean Drive Manager	nent, Inc.				
SOBSEC		Name of corporation	on - must	nclude suffix		
Dear Sir o	or Madam:					
"Certifica	sed "Application by Fore te of Existence," or "Cer crenced foreign corporati	tificate of Good Sta	anding" ar	nd check are sub		
Please ret	um all correspondence co	onceming this matt	er to the f	ollowing:		
Kathie Car	rter					
		Name o	of Person			
Ocean Dri	ve Management Inc					
	•	Firm/Co	ompany			
28850 Ver	sol Drive Unit #207					~ <u>.</u> 2
		Add	dress			121
Bonita Spr	rings, FL 34135				•	100 S
		City/State	and Zip c	ode		22
kathieteart	er@gmail.com			·	· · · · · · · · · · · · · · · · · · ·	<u> </u>
For furthe	E-mail or information concerning	address: (to be used g this matter, please		e annual report	notification) :	1: 28
Richard W	'alker	at (726-	1684		
	Name of Person	Area Co	ode	Daytime Telep	ohone Number	
R D T 2	TREET/COURIER AD legistration Section division of Corporations the Centre of Tallahassee 415 N. Monroe Street, Strallahassee, FL 32303			MAILING A Registration S Division of C P.O. Box 632 Tallahassee	Section Corporations 27	
Please mal	•		□ \$78.75	Filing Fee & lied Copy	\$87.50 F Certification PLEGSE	ite of Status &

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.

— Ocean Drive Ma L	magement, Inc			
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate name ac	dopted for the purpose of transacting bus	siness in Florida)	
Colorado		30-0081877		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
4. 11/13/2003	5			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6.				
7 300 Center Drive	(Date first transacted business in 1 (SEE SECTIONS 607.1501 & 607.150) Suite G-140, Superior CO 80027			
1		c <u>street</u> address)		
28850	Versol Dr. Unit 207 (Current mailing		L 34135	
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	799	
Name:	Kathie Carter	<u></u>	- : 읔 ::	
Office Address:	28850 Versol Dr Unit #207		M21 OCT 22 PH 1:21	
	Bonita Springs	, Florida <u></u>	T i	
	(City)	(Zip code)	1:28	

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.

(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.

Chairman Name	A. DIRECTORS				
Director Suite G-140 Director Superior, CO 80027 President Superior, CO 80027 President Superior, CO 80027 President Superior, CO 80027 President Superior, CO 80027 Director Dir	□Chairman	Name:	□Chairman		
Director Director Superior, CO 80027 President Superior, CO 80027 President Vice President Vice President Ditesturer	□Vice Chairman	Address:	□Vice Chairman	Address:	lenter Dr
Director	□Director		□Director	Suite G-140	
Secretary	President		□President	Superior, CO 8	0027
Chairman Name:	□Vice President		■Vice President		
Chairman Name:	☐ Secretary	☐Treasurer	☐ Secretary		□Treasurer
Olicetor	□Other	Other	□Other		□Other
Olicetor	□Chairman	Name:	□Chairman	Name:	
Director Director President President Vice President Vice President Chairman Name: Chairman Name: Chairman Address: Vice Chairman Address: Director Director President President Chairman Name: Chairman Name: Chairman Address: Vice Chairman Address: Director Director President President Vice President Vice President Chairman Address: Treasurer Chairman Chairman Address: Treasurer Chairman Chairman Chairman Chairman Chairman Address: Treasurer Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chairman Chair	□ Vice Chairman		□Vice Chairman		
President					
Chairman Name: Chai					
Chairman Name:	□ Secretary		☐Secretary		
Chairman Name: Chairman Name: Square Chairman Name: Square of Director Chairman Address: Square of Director Chairman Chair	□Other	Other	□Other	·· · ·	
Chairman Name: Chairman Name:					3 126
Vice Chairman Address:	□Chairman	Name:	□Chaiлnan	Name:)07
Director Dother Dother Dother Dother Dother Dother Director	□Vice Chairman	Address:	□Vice Chairman	Address:	23
□ President □ Vice President □ Vice President □ Vice President □ Secretary □ Treasurer □ Other □ Other □ Other □ Other □ Other □ Other □ Other □	Director		□Director		
Secretary	□President	<u> </u>	□President		28
Important Notice: Use an attachment to report 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. 12. 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 of 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. Kather T. Carter VP	□Vice President		□Vice President		
Important Notice: Use an attachment to report 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. 12. 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 of 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. Kathae T. Carter VP	☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
12. 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 of 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. **Add Ge** T.** Carter** Carter** VP	□Other	Other	□Other		□Other
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 of 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. **Carter** Carter** VP	individuals may b	e added to the index when filing your Florida Departme	ent of State Annual R	eport form.	
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	she is aware that f	ector signing this document (and who is listed in numbe	er 11 above) affirms ti	hat the facts stated	I herein are true and that he o
1 / 1 Per CI TATALERA DIGINE DIRI GIRAGON AN DICIONAL DIRIGINA DI DICIONALI	13.			$\frac{V P}{P}$	

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

OCEAN DRIVE MANAGEMENT, INC.

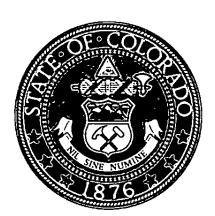
is a

Corporation

formed or registered on 11/13/2003 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20031357663.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 10/08/2021 that have been posted, and by documents delivered to this office electronically through 10/11/2021 @ 14:46:26.

I have affixed hereto the Great Scal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 10/11/2021 @ 14:46:26 in accordance with applicable law. This certificate is assigned Confirmation Number 13501955



Secretary of State of the State of Colorado

*******************End of Certificate******

Sotice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.uc/biz/CertificateSearch/Criteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.uc/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."