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S. HAWKES

COVER LETTER

Division of Corporations CASTOR SOLAR, INC.			
SUBJECT: Name of corporation - n	nust include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Aut "Certificate of Existence," or "Certificate of Good Standin above referenced foreign corporation to transact business is	g" and check are submitted to register the		
Please return all correspondence concerning this matter to ROBERT F. KILLINGSWORTH, III	the following:		
Name of Per CASTOR SOLAR, INC.	son		
Firm/Compar 329 TEAKWOOD DR.	ıy		
YOUNGSVILLE, LA 70592			
City/State and Z BEAU.CASTORSOLAR@GMAIL.COM	Zip code		
E-mail address: (to be used for t	future annual report notification)		
For further information concerning this matter, please call:			
OBERT F. KILLINGSWORTH, III 337 5263744 at () Name of Person Area Code Daytime Telephone Number			
Name of Person Area 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		
2	F STATE. 78.75 Filing Fee & \$87.50 Filing Fee. Certified Copy 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.

CASTOR SOL	AR, INC.			
	orporation; must include "INCORPORA orp," "Inc," "Co," or "Corp.")	ATED," "COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate	name adopted for the purpose of transacting bu	siness in Florida)	
Delaware		3. 87-3221341		
(State or countr	y under the law of which it is incorpora-	ted) (FEI number, if application	ible)	
10.21.21		5.		
(Date	(Date of incorporation) 5. (Date of duration, if other than p			
N/A				
		iness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)		
17841 Hunting E	Bow Circle, Lutz, FL 33558			
		pal office street address)		
329 Teakwood	Dr., Youngsville, LA 70592	·		
	(Current	mailing address, if different)		
Name and stree	et address of Florida registered agent Kenneth Martinez	t: (P.O. Box <u>NOT</u> acceptable)		
ffice Address:	17841 Hunting Bow Circle	44-91	PH 4: 51	
	Lutz	Florida 33558	过去	
	(City)	(Zip code)	m	
faving been nam lesignated in this urther agree to c	ent's acceptance: ned as registered agent and to accep application, I hereby accept the ap	Florida 33558 (Zip code) of service of process for the above stated compointment as registered agent and agree to tutes relative to the proper and complete polymy position as registered agent.	rv) rporation at the p act in this capac	
	12	<i>/</i> ·		
_	(Registered ag	ent'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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS	Kenneth Lucra Martinez, Jr.		Robert Floyd Killingsworth, HI		
□ Chairman	Name:	Chairman	Name:		
□Vice Chairman	7110 Moss Ledge Run Address:	□Vice Chairman	329 Teakwood Dr. Address:		
□Director	Land O Lakes, FL 34637	Director	Youngsville, LA 70592		
□President		□President			
□Vice President		□Vice President			
□Secretary Officer	☐Treasurer Director	☐Secretary Officer	☐Treasurer Director		
Officer Other		Officer			
☐Director ☐President	Steve Free Name: 7247 Kentish Dr. Address: Ft Worth, TX 76137 Treasurer Director Other	☐ Chairman ☐ Vice Chairman ☐ Director ☐ President ☐ Vice President ☐ Secretary ☐ Other	Name:		
□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 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.					
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. Kenneth Luera Martinez, Jr.; Officer, Member of Board of Directors and Shareholder of Castor Solar, Inc.					

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CASTOR SOLAR, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF OCTOBER, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CASTOR SOLAR,

INC." WAS INCORPORATED ON THE NINETEENTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

Authentication: 204485761

Date: 10-22-21

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