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CEC 07 2021 K. Brumbley

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

FROM Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 12/7/2021
ORDER ENTITY
ASTRYA GLOBAL, INC.

REQUEST DATE 12/7/2021	PRIORITY Regular Approval	OUR REF_#_(Order_ID#)] 978680
ORDER ENTITY		
ASTRYA GLOBAL, INC.		
PLEASE PERFORM THE FOLLO		
ASTRYA GLOBAL, INC. (FL)		
File the attached foreign qualific	ation document and provide a certified co	ov and certificate of status
•	,	F)
NOTES:		
\$87.50 Authorized		
	minders: jeffrey.leas@astryaglobal.com	-y
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RETURN/FORWARDING INST	DICTIONS	
ACCOUNT NUMBER: 12005000005		
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Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, December 7, 2021 Page I of I

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.

WYOMING	•	ame adopted for the purpose of transacti	ing dustness in Florida)
<u> </u>	y under the law of which it is incorporated	3. 47-1452858	
06/20/2014	y under the law of which it is incorporated	• • • • • • • • • • • • • • • • • • • •	ipplicable)
1	of incorporation)	5. perpetual (Date of duration, if other	- A
5. N/A		(Date of diffation, if other	r than perpetual)
7. 4655 Cass St. Su:	te 112, San Diego, CA92109	7.1502, F.S., to determine penalty liabi	lity)
1261 Thomas Av	(Principal re, San Diego, CA 92109	office <u>street</u> address)	
	(Current ma	ailing address, if different)	22
. Name and street	et address of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	2021 DEC SECRET, (ALLA)
Name:	SunDoc Filings Incorporated		
	3458 Lakeshore Drive		AM CO
Office Address:			
Office Address:	Tallahassee	, Florida <u>32312</u> (Zip code)	8: 5 57411 6021

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.

(Registered agent's signature)

A. DIRECTORS Joseph Ventura Jeffrey Leas ☐ Chairman □ Chairman Name: Address: 4655 Cass St, Suite 112 4655 Cass St, Suite 112 □Vice Chairman Address: □ Vice Chairman San Diego, CA 92109 San Diego, CA 92109 ☐D:rector □ Director President □ President □Vice President ☐ Vice President ☐ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer □ Other _____ ☐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 ____ 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 ___ 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. 13. ___ Jeffrey Leas, VP & COO

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

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Astrya Global, Inc.

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **June 20, 2014**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2014-000667140**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 6th day of December, 2021 at 4:16 PM. This certificate is assigned ID Number 048450534.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.