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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN BERNEL, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
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Electronic Filing Menu Corporate Filing Menu

Help

To:

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F22000000196

| | (Document nur | mber of corporation (if known) | | | |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------|-----------------|
| BERNEL, INC. | | | | | |
| (i | Name of corporation as it app | ears on the records of the Depu | rtment of Stat | (c) | |
| California | | 3.01/07/2022 | | | |
| (Incorpora | ted under laws of) | (Date authorities) | orized to do b | usiness in Florida | 1) |
| | | SECTION II | | | |
| | (4-7 COMPLETE ON) | LY THE APPLICABLE CIL | ANGES) | | |
| . If the amendment changes the r | name of the corporation, wher | n was the change effected unde | r the laws of i | ts jurisdiction of | |
| incorporation? | | | | ار برور در | 02 ¹ |
| | | | | | 3 7 |
| (Name of corporation after the not contained in new name of | amendment, adding suffix "c | orporation," "company," or "in | corporated." | or appropriate abl | orqviation; |
| not comained in new name of | the corporation) | | | 英气 | _ |
| (H'nous pouvo i comproilable in l | Clasida sata alternativa con co | | | . SS | 3 |
| (If new name is unavailable in I | florida, enter atternate corpor | ate name adopted for the purpo | ise of transact | ing business in F | lorida i |
| | the period of duration, indica | | | | <u></u> |
| | | | | • | |
| | | - | | | |
| | | (New duration) | | | |
| | | | | | |
| 7. If the amendment changes | | ion, indicate new jurisdiction. | | | |
| | Delaware | | | | |
| | U; | New jurisdiction) | | | |
| | | | | | |
| . If amending the registered as | ent and/or registered office | address in Florida, enter the | name of the | - | |
| new registered agent and/or | the new registered office add | dress: | | | |
| Name of New Registered : | Igent | | | | |
| | | | | | |
| | įFlorie | da street address) | | | |
| New Registered Office Adds | /85.4.*· | | , Flerida_ | | |
| were the grates and symbol state. | 1550 | (City) | , rienus_ | (Zip Code) | - |
| \$/ 1) | and the second s | 4.4 | | | |
| New Registered Agent's Sign I hereby accept the appointment | nantre, it changing Registera nt as registered agent. I am t | <u>co Agent:</u> familiar with and accept the ob | livations of th | c nosition. | |
| , vene (#/); | and the second s | and the second s | - &= a - a - a - a - a - a - a - a - a - a | .= 1 | |
| Sign return of | New Registered Agent, if cha- | nging | | | |
| | The region realingent in this | "6"b | | | |

| Title/ Capacity | <u>Name</u> | <u>Address</u> | Type of Action |
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| Attached is a certificate of the application to the under the laws of which | e or document of similar import, evider Department of State, by the Secretary of hit is incorporated. | ncing the amendment, authentics of State or other official having cu | ated not more than 90 days prior to destody of corporate records in the jurisc |
| | Altin | | |
| | (Signature of a director, p a receiver or other court | president or other officer - if in the appointed fiduciary, by that fidu | te hands of ciary) |
| Richard Ennis | | CEO | |

FILING FEE \$35.00

To:



Page 1

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

DELAWARE, DO HEREBY CERTIFY "BERNEL, 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-FIRST DAY OF AUGUST, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 204212838

Date: 08-21-24