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Advanced Incorporating Service

1317 California Street P.O. Box 20396 Tallahassee, FL 32316 Phone: 850-222-CORP Fax: 850-575-2724 Email: włopez@aisincfl.com Website: www.aisincfl.com

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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.

State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Date of duration, if other than perpetual (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 6204 Lipizzan Ln, Wildomar, CA 92595 (Principal office street address) (Current mailing address, if different) ame and street address of Florida registered agent: (P.O. Box NOT acceptable) Universal Registered Agents, Inc.	(Principal office street address) (Current mailing address, if different) (FEI number, if applicable) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Lipizzan Ln, Wildomar, CA 92595 (Principal office street address) (Current mailing address, if different)	(FEI number, if applicable) (Poste of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 4 Lipizzan Ln, Wildomar, CA 92595 (Principal office street address) (Current mailing address, if different) and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Universal Registered Agents, Inc. 1317 California Street Tallahassee (City) (City) (FEI number, if applicable) (Date of duration, if other than perpetual)	name unavail:	able in Florida, enter alternate corporate name a		ing business in Florida
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under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

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

A. DIRECTORS	:					
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address: 36204 Lipizzan Ln	□Vice Chairman	Address:			
□Director	Wildomar, CA 92595	□Director				
■President		□President				
□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			
			•			
□Chairman	Name:	□Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
□ Director		□Director				
□President		□President				
□Vice President	<u> </u>	□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 PARTY NAMED IN	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.						
-m At x	lilliam Leonard, President					

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,

Ibex Capital Inc

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **October 4, 2021**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2021-001040757**.

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 20th day of January, 2022 at 8:31 AM. This certificate is assigned ID Number 049338033.

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.