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/D.,	siness Entity Name	<u> </u>
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Certified Copies	_ Certificates o	of Status
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Special Instructions to	Filing Officer;	

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S. FRANKLIN MAR 1 7 2022

#### **COVER LETTER**

	gistration Section vision of Corporations					
SUBJECT	Levatas, Inc.					
SCEC		of corporation - m	ust include suffix	•		
Dear Sir or	Madam:					
"Certificate	ed "Application by Foreign C e of Existence," or "Certificat renced foreign corporation to	e of Good Standing	g" and check are submitt			
Please retu	rn all correspondence concerr	ning this matter to (	the following:			
Justin Benn	ett				20	
Levatas, Inc		Name of Per	son		2022 HAR	
	·	Firm/Compan		••		* sre
1250 Elizab	eth Ave., Suite 3				PH	, <del>     </del>
-		Address		· .	<u></u> :-	- + ·
West Palm	Beach FL 33401				02	
		City/State and 2	Zip code			
justin.benne	tt@levatas.com					
	E-mail addres	ss: (to be used for f	uture annual report notif	fication)		
For further	information concerning this	matter, please call:				
Ryan Gay		at ()	707-3654		<u> </u>	
N	ame of Person	Area Code	Daytime Telephon	e Number		
Re Di <sup>1</sup> Th 24	REET/COURIER ADDRES gistration Section vision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suite 81 llahassee, FL 32303		MAILING ADD Registration Secti Division of Corpx P.O. Box 6327 Tallahassee, FL.	on prations		
	a check for the following am check payable to: FLORIDA D Filing Fee	DEPARTMENT OF ng Fee & S7		\$87.50 Fil	of Sta	
				Certified (	Сору	

### 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.

(1) hame unavain	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting bus	iness in F	lorida)	
Delaware	3				_
(State or countr	y under the law of which it is incorporated)	(FEI number, if applications)	ble)		
03/18/2022	of incorporation) 5.				_
(Date	of incorporation)	(Date of duration, if other than p	perpetual)		
03/18/2022					
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1501			202	
1250 Elizabeth A	ve., Suite 3, West Palm Beach Fl. 33401	,,	٦.	2 H	<b>-</b>
(Principal office street address)			<del>- 5</del>		
			÷.	7	•
	(Current mailing	address, if different)		PH 4: 02	-
			. ' -13'	ļ: (	•
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	' .	)2	
Name:	Helen S. Bennett, P.A.				
ffice Address:	7050 W Palmetto Park Rd. 15-249				
mee Address.	Boca Raton	 13113			
	(City)	, Florida 33433 (Zip code)			
	(City)	(Zip code)			

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)

4E88598C4A90477...

#### DocuSign Envelope ID: BB92FFF8-A4DC-477E-89E1-A59726834001

#### A. DIRECTORS

□ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address: 1250 Elizabeth Ave., Suite 3			
Director	West Palm Beach FL 33401	□ Director	West Palm Beach FL 33401			
President		□President				
□ Vice President		☐ Vice President				
☐ Secretary	□Treasurer	Secretary	Treasurer			
□Other		Other	Other			
□ Chairman	Name: Daniel Bruce	□ Chairman	Name:			
□Vice Chairman	Address: 1250 Elizabeth Ave., Suite 3	☐ Vice Chairman	Address:			
□Director	West Palm Beach FL 33401	□Director				
□President		□President				
<b>⊠</b> Vice President		☐Vice President	2022			
☐ Secretary	☐ Treasurer	Secretary	□Treasurer 1			
□Other		□Other				
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:		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 the additional to the index when filing your Florida Department of State Annual Report form.						
	Signature of Director or					
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.						

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "LEVATAS, 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 SEVENTEENTH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEVATAS, INC."

WAS INCORPORATED ON THE FIFTEENTH DAY OF MARCH, A.D. 2022.

2022 HAR 17 PH 4: 02

Authentication: 202940885

Date: 03-17-22