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Name:	Atom Powe	r, Inc.	
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Thank you!

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.

,,	Corp," "Inc," "Co," or "Corp.")			
(If name unavai	lable in Florida, enter alternate corporate name ad	lopted for ti	he purpose of transact	ing business in Florida)
North Carolina	3.			
(State or count	ry under the law of which it is incorporated)		(FEI number, if a	pplicable)
12/2/2016	5.			
(Dat	e of incorporation)	(Da	ate of duration, if other	r than perpetual)
December 1, 20	021			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150			ility)
13245 Reese I	Blvd. W, Suite 130, Huntersville, NC 28078			
	(Principal office	street add	lress)	
	(Current mailing	address if	different)	
		404.000, 11	u	
		400.050, 17	u ,	
Name and stre	et address of Florida registered agent: (P.O.			
				¥47 - 22
Name:	et address of Florida registered agent: (P.O.			2022 A
Name:	net address of Florida registered agent: (P.O. National Registered Agents, Inc.			2022 APR 1.2 SF 1.31ASS
Name:	National Registered Agents, Inc. 1200 South Pine Island Road	Box <u>NOT</u> 	<u>Cacceptable</u>)	2022 APR 12 F
Name:	National Registered Agents, Inc. 1200 South Pine Island Road Plantation (City)	Box <u>NOT</u> 	Cacceptable)	2022 APR 12 PH SECTION OF SECURITY OF SECU
Name: Tice Address: Registered ag	National Registered Agents, Inc. 1200 South Pine Island Road Plantation (City)	Box <u>NOT</u> , FL	Cacceptable) 33324 (Zip code)	0.3 11.5
Name: Tice Address: Registered agaving been nan signated in thi	National Registered Agents, Inc. 1200 South Pine Island Road Plantation (City) gent's acceptance: med as registered agent and to accept services application, I hereby accept the appointme	Box NOT FL of proces	Sacceptable) 33324 (Zip code) Sample of the above statestered agent and agent agent and agent agen	ed corporation at the present to act in this capac
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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]:

L019 -11/16/0021 Washes Flower Deline

A. DIRECTORS Billy Graves Ryan J. Kennedy □Chairman 4Chairman 13245 Reese Blvd. W. Suite 130 13245 Reese Blvd. W. Suite 130 □ Vice Chairman Address: □Vice Charman Address: Huntersville, NC 28078 Huntersville, NC 28078 Director ②Director 图President □President □ Vice President 1. Vice President □Treasurer **IlTreasurer** □ Secretary □ Secretary CEO ⊠Other _____ □Other ____ □Other _____ □Other ______ Name: Gert Wrigge Dems Kouroussis ☐ Chairman **EChairman** 13245 Reese Blvd. W, Suite 130 13245 Reese Blvd. W, Suite 130 □Vice Chairman □ Vice Chairman Address: Address: Huntersville, NC 28078 Huntersville, NC 28078 3. Director ☑ Director □President □ President □Vice President □Vice President \square Treasurer □ Secretary **Eillreasurer** □ Secretary ☐ Other _____ CiOther _____ □Other _____ □Other _____ Name: _____ Name: 1. Chairman □Chairman 13245 Reese Blvd, W, Suite 130 □ Vice Chairman Address: II Vice Chairman Address: Huntersville, NC 28078 □ Director □ Director **ElPresident** President □Vice President ElVice President ☐Treasurer **∐**Secretary ☐Treasurer Secretary CFO ⊠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. Eric Dana, Chief Financial Officer (Typed or printed name and capacity of person signing application)



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

ATOM POWER, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 2nd day of December, 2016, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 11th day of April, 2022.

Elaine J. Marshall

Secretary of State