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(Requestor's Name)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
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(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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S. ROBERTS APR 2 1 2022

COVER LETTER

TO:	O: Registration Section Division of Corporations							
SUBJ	FCT: CARIBOO INDUST	TRIAL ELECTRIC U	S, INC.					
(7(71))		Name of corporation	on - mus	include suffix				
Dear S	ir or Madam;							
"Certif	nclosed "Application by Fo ficate of Existence," or "Co referenced foreign corpora	ertificate of Good St	anding":	and check are sub				
Please	return all correspondence	concerning this matt	er to the	following:				
MONI	CA LANGFELDT							
		Name o	f Person					
LANG	FELDT LAW, PLLC							
		Firm/Co	mpany					
2560 5	TH AVE W							
		Ade	iress					
SEATI	TLE, WA 98119							
		City/State	and Zip	code				
monica	@langfeldtlaw.com		_					
	E-mai	address: (to be used	I for futu	re annual report i	notification)			
For fu	ther information concernit	ng this matter, please	call:					
MONICA LANGFELDT 206				de Daytime Telephone Number				
	Name of Person	Area Co	ode	Daytime Telep	hone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Please a		ving amount: RIDA DEPARTMEN .75 Filing Fee & tificate of Status	□ \$78.7	FATE 75 Filing Fee & fied Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy			

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.

(Enter name of c	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp."))," "(COMPANY," "CORPORATION	4."			
	CTRIC US. INC.						
	able in Florida, enter alternate corporate nam			ig business in Florida)			
NEVADA	NEVADA (State or country under the law of which it is incorporated)		3. 30-0960409				
(State or countr			(FEI number, if applicable)				
4. 12/1/2016	-	÷					
	of incorporation)		(Date of duration, if other	Date of duration, if other than perpetual)			
6. APRIL 27, 2021	2						
7	ES FERRY ROAD NE. SUITE 1805. ATLAI (Principal o		treet address)				
	(Current mai	ling a	ddress, if different)				
8. Name and streen Name: Office Address:	et address of Florida registered agent: (F C T Corporation System 1200 South Pine Island Road, Plantation (City)		Sox NOT acceptable)	2022 APR 21 AM 9: 41 SULTANASSECTEL			

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kevin Wartner Assistant Secretary

(Registered agent's signature)

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.

A. DIRECTORS ROBERT HEWITT JARRETT TYLER MCLEAN □ Chairman □ Chairman Name: 1541 TYNEBRIDGE COURT 714 ROBSON DR. ☐ Vice Chairman Address: ☐ Vice Chairman Address: WHISTLER KAMLOOPS □ Director □ Director **BC V8E 0A3 BC V2E 2G8** ■ President ☐ President CANADA CANADA ☐ Vice President Vice President □ Sccretary ☐ Treasurer □ Sccrctary ☐ Treasurer □Other _____ Other____ □Other _____ Other ____ CARRIE HEWITT □ Chairman □ Chairman Name: 1541 TYNEBRIDGE COURT ☐ Vice Chairman Address: ☐ Vice Chairman Address: WHISTLER □ Director Director BC V8E 0A3 ☐ President □ President CANADA □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 you 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. ROBERT HEWITT, PRESIDENT

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

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **CARIBOO INDUSTRIAL ELECTRIC US, INC.**, as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 12/01/2016, and is in good standing in this state.

Certificate Number: B202204132577768

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 04/13/2022.

BARBARA K. CEGAVSKE Secretary of State