## F220000003876

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SECRETARY SI STATE

## **COVER LETTER**

ΓO: Registration Section Division of Corporations			
SUBJECT: Cappsool Technologies, Inc.			
Name c	of corporation - n	nust include suffix	
Dear Su or Madam:			
The enclosed "Application by Foreign Co Certificate of Existence," or "Certificate above referenced foreign corporation to tr	of Good Standm	g" and check are summ	Business in Florida." ited to register the
Please return all correspondence concerni	ng this matter to	the following:	
Sabrina Slater			
	Name of Per	son	
ILSA, a ReSource Pro Company			
	Firm Compa	ny	<del></del>
111 N. Radroad St.			
	Address		
Groesbeck, TX 76642			
	City/State and	Zip code	
carolyn.vigodnya naturalint.com			
E-mail addres	s: (to be used for	future annual report ne	tification)
For further information concerning this r	natier, please cal	<b>l</b> :	
Sabrina Slater	254	) 729-6100 de Daytime Telephone Number	
Name of Person	Area Code	Daytime Teleph	one Number
STREET/COURTER 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	
Enclosed is a check for the following at Please make check payable to: FLORIDA    \$\infty\$ \$70.00 Filing Fee  \$78.75 Fil  Certificate	DEPARTMENT (	OF STATE \$78,75 Filing Fee & Certified Copy	☐ \$87.50 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

1. Cappsool Te	echnologies, Inc.					
(Enter name "Inc.," "Co.,	of corporation; must include "INCORPORATED." " "Corp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"	<del></del>			
CapsTech.						
(If name una	vailable in Florida, enter alternate corporate name a	idopted for the purpose of transacting bush	ness in Florida)			
2. DE	61.2021.903					
(State or co	State or country under the law of which it is incorporated) (FEI number, if applicable)					
4, 11 24 2021						
1)	Sate of incorporation) 5.	(Date of duration, if other than pe	(Date of duration, if other than perpennal)			
D						
	(Date first transacted business in (SEE SECTIONS 607-1501-9-607-150	Florida, if prior to (egistration) 02, F.S., to determine penalty hability)				
_ 4023 Kennett	Pike #50055, Wilmington, DE 19807	oz. ( .5 to determine penanty maonity)	202 1A1 1A1			
·		re <u>street</u> address)	SEURE IN			
	·					
	(Current mailing	g address, if different)	- 335			
			n P			
8. Name and s	treet address of Florida registered agent: (P.O.	. Box NOT acceptable)				
	Corporate Creations Network Inc.					
Name			~ ) · ·			
	Stil US Highway 1	············	<b>*</b>			
Name Office Address	801 US Highway 1		ን '			
	Stil US Highway 1	F1. 33408 (Zip code)	ʹ જ			

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.

Corporate Creations Network Inc

By: Carlos M Alvarez, Special 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.

<sup>11</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (0) total]

A. DIRECTORS				
T Chairman	Name Nir Greenberg	T Chairman	Name:	
* Vice Chamman	Address, 4023 Kennett Pike #50055	2 Vice Chairman		
EDirector	Wilmington, DF 19807	_Director		
E President		□President		
□Vice President		□Vice President		
DSecretary	Z.Treasurer	Z Secretary		_ Treasurer
ZOther		□Other		
TiChairman	Name	II Chairman	Name:	
UVice Chairman	Address	_Vice Chairman	Address:	·
DDirector		Director		
Ti President		LiPresident		
Wicz President		□Vice President		· · · · · · · · · · · · · · · · · · ·
	. Wreasurer	<b>I</b> Secretary		□Treasurer
Other	Other	:TOther		, Other
T.Charman	Name:	□Chairman	Name:	
□Vice Chauman	Address:	□Vice Chairman	Address:	
Director		Director		<del> </del>
TPresident		□ President		<del></del>
_ Vice President		□Vice President		
Z Secretary	Treasurer	□ Secretary		☐Treasurer
		TOther	<del></del>	]Other
	Se an attachment to report more than six (6). The added to the index when filing your Florida Depa	irtment of State Annual Rep		purposes only Non-indexed
2	Nignature of Direct	1-15 /2/		
The officer of direct he is aware that fal (817,155, F.S.	tor signing this document (and who is listed in nu- se information submitted in a document to the Do	mber 11 above) affirms tha	t the facts stat es a third degr	ed herein are true and that he or ee felony as provided for in
3. Nit Greenberg	(Typed or printed name and capacity of	nerson signing mulication)		
	to Meet or human mone and enhacing or	become informer obdinermouth		

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CAPPSOOL TECHNOLOGIES, 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 EIGHTEENTH DAY OF MAY, A.D. 2022.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CAPPSOOL TECHNOLOGIES, INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF NOVEMBER, A.D. 2021.

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

Authentication: 203465036

Date: 05-18-22