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ROUNDTRIP EV SOLUTIONS INC.

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COVER LETTER

TO: Registration Sec Division of Corp	porations				
SUBJECT: Roundtrip	EV Solutions Inc.				
		ration - mus	t include suffix		
Dear Sir or Madam:					
"Certificate of Existence	on by Foreign Corporatio," or "Certificate of Good corporation to transact b	d Standing"	and check are sub		
Please return all correspo	ondence concerning this r	natter to the	following:		
Alan Hurwitz					
	Nan	ne of Persor	1	-	
Roundtrip EV Solutions In	e.				2022 i
	Firm	/Company			,
700 Canal Street, Suite 1					26 F: 10:
		Address			
Stamford, CT 06902					ラ
	City/S	tate and Zip	code		رع رع
accounting@roundtripev.co	om				
	E-mail address: (to be a	used for futt	ire annual report i	notification)	
For further information of	oncerning this matter, ple	ease call:			
Alan Hurwitz	203 at () 470)-5102		
Name of Person	Area	Code	Daytime Telep	hone Number	_
Registration Sec Division of Corp The Centre of Ta	orations Ilahassee Street, Suite 810		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	
Enclosed is a check for the Please make check payable ☐ \$70.00 Filing Fee	to: FLORIDA DEPARTM S78.75 Filing Fee & Certificate of Status	□ \$78.7	TATE 75 Filing Fee & fied Copy	☐ \$87.50 Fili Certificate Certified C	of Status &

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.

utions Inc.		_
	"COMPANY," "CORPORATION."	
de in Florida, enter alternate corporate name a	dopted for the purpose of transacting busi	ness in Florida)
3	88-1284006	
under the law of which it is incorporated)	(FEI number, if applicab	le)
5.		
f incorporation)	(Date of duration, if other than pe	erpetual)
een transacted in Florida		
(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02. F.S., to determine penalty liability)	-
uite 1, Stamford, CT 06902		37
	re <u>street</u> address)	17.
(Current mailing	g address, if different)	26
address of Florida registered agent: (P.O Registered Agent Solutions, Inc.	. Box NOT acceptable)	F.110: ?2
155 Office Plaza Dr., Suite A		
Tallahassee	, Florida <u>32302</u>	
(City)	(Zip code)	
d as registered agent and to accept service pplication, I hereby accept the appointmently with the provisions of all statutes re	ent as registered agent and agree to a lative to the proper and complete per	ict in this capac
(Registered agent's sig	gnature)	
ertificate of existence duly authenticated	not more than 90 days prior to delivery	of this applicat
	poration; must include "INCORPORATED," p," "Inc," "Co," or "Corp.") ole in Florida, enter alternate corporate name a	poration; must include "INCORPORATED," "COMPANY," "CORPORATION." p., "Inc." "Co.," or "Corp.") Define in Florida, enter alternate corporate name adopted for the purpose of transacting busing a series of transacting busing series of the law of which it is incorporated) [Selection of the purpose of transacting busing series of transacted business in Florida, (FEI number, if applicable of the purpose of transacting busing series of transacting business of transacting busines

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

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

A. DIRECTORS

· . · · · · · ·

Chairman	Name: Daniel Friedberg	□Chairman Na	me:
□Vice Chairman	700 Canal Street, Suite 1		ldress:
□Director	Stamford, CT 06902	□Director	
□President		□President	
□Vice President		□ Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	Other	○Other
⊒Chairman	Name:	□Chairman Na	me:
⊒Vice Chairman	Address:	□ Vice Chairman Ac	ldress:
□Director		□Director	
∃President		□President	
□Vice President	<u> </u>	□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
Other		□Other	Other
⊒Chairman	Name:	Chairman Nai	73 73 me:
∃Vice Chairman	Address:		ldress:
3Director	Stamford, CT 06902		⊕ ⊕
∃President		□President	
□Vice President		□Vice President	····
Secretary	□Treasurer	□Secretary	□Treasurer
□Other	Other	Other	□Other

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.

Alan Hurwitz, Secretary

13.

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ROUNDTRIP EV SOLUTIONS 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 TWENTY-FIFTH DAY OF AUGUST, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROUNDTRIP EV SOLUTIONS INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF MARCH,

A.D. 2022.

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

: 26 Fillur 30



Authentication: 204247903

Date: 08-25-22

6677228 8300 SR# 20223359770