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FOREIGN PROFIT/NONPROFIT CORPORATION CONTINUUM VENTURE PARTNERS, INC.

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To:

COVER LETTER

TO:		tration Section ion of Corporations					
		CONTINUUM VENTURE PA	ARTNERS, IN	C.			
SUBJ	EC4:				include suffix		
Dear S	ir or M	adam;					
"Certif	leate of	"Application by Foreign Corf Existence," or "Certificate c ced foreign corporation to tra	of Good Stand	ding" c	ind check are subt	t Bus nitted	iness in Florida," to register the
Please	reliun :	all correspondence concerning	g this matter	to the	following:		
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	Regis Divis The C 2415	EET/COURIER ADDRESS stration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	i:		MAILING Al Registration Se Division of Co P.O. Box 6327 Tallahassee, F.	ectior orpora	tions
Please	make el	check for the following amore leck payable to: FLORIDA DE ing Fee	PARTMENT Fee & =	\$78.7	TATE 75 Filing Fee & fied Copy		\$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

LegalZoom.com, Inc.

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.

	VENTURE PARTNERS, INC.			
	orporation; must include "INCORPORATED," "Copp." "Inc." "Co," or "Corp.")	OMPANY," "CORPORATION	S."	
(If name unavails	ible in Florida, enter alternate corporate name ado	pted for the purpose of transactin	g business in Florida)	
DELAWARE	3			
(State or countr	3 y under the law of which it is incorporated)	(FEI number, if ap	pticable)	
1 12/30/2021	5			
(Date	of incorporation) 5.	(Date of duration, if other)	than perpetual)	
6				
v	(Date first transacted business in Fk (SEE SECTIONS 607.1501 & 607.1502.		ity)	
7 5798 SW 68th St	Miami, FL 33143		±4. ~	
, · <u> </u>	(Principal office s	treet address)	DZZ SEP	
	(Current mailing ac	ddress, if different)	20 20	i n
8. Name and street	et address of Florida registered agent: (P.O. B	ox NOT acceptable)	PH 2: 51	כ
Name:	United States Corporation Agents, Inc.	_	2: 51	
Office Address:	3575 S. Semoran Blvd., Suite 36	_		
	Orlando	Florida 32822		
	Orlando (City)	(Zip code)		
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relatives with and accept the obligations of my position (Registered agent's signal	t as registered agent and agre five to the proper and complet on as registered agent. Cheyenne Moseley, As behalf of United States	ee to act in this capacit te performance of my (ty. I Iuties,
	Oversited agent 5 agin	·····/		

^{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.

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A. DIRECTORS					
□Chairmao	Name: Ken Reimer	□Chairman □Vice Chairman	Name: Steve Richards Name: 985 Harbor View North Address:		
□Vice Chairman	Address: 5220 NW 72nd Avenue, Unit 22				
Director	Miami, FL 33166	☐Director	Hollywood, F	L 33019	
# President	د المحاولة المحاولة المحاولة المحاولة في المحاولة	□ President	والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة	nador ny 17 g. tr. v. majegg norgapiski kasajelji hilifikaninah protesta nadojeli melika Kalimbia	
□Vice President		□Vice President			
☐Secretary	☐ Treasurer	⊞ Secretary		Treasurer	
CEO CEO		☐ CIO		□Other	
	Managad Singh				
□ Chairman	Manpreet Singh	⊡Chairman	Name.	The second secon	
□Vice Chairman	Address:	☐Vice Chairman	Address:	and the state of t	
Director	Miami, FL 33166	□Director	AN + 544 1741 CONTRACTOR		
□President	and the state of t	□President			
⊕Vice President		□Vice President	ما دور		
ElSecretary	[[Treasurer	☐ Secretary		□Treasurer	
[]Other	Other	Other		□Other	
☐Chairman	Name:	□ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
Director		□Director			
□President		☐ President			
□Vice President	of hydrogen and a second state of the second	□Vice President	<u> </u>		
□Secretary	[] Treasurer	□ Sottetary		☐ Treasurer	
□Other	Other	⊡Other		□Other	
individuals may b	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department	nt of State Annual R	eport form.		
12.	Signature of Director of	r Officer			
she is aware that fi s.817.155, F.S.	ctor signing this document (and who is listed in number also information submitted in a document to the Depart	r 11 above) affirms ti	hat the facts state	d herein are true and that he or	
13. Steve Richa	ards, Secretary (Typed or printed name and capacity of persons)	m simina analicatica	n)		
	Explica or biting name and calmony or beise	ar eferme ablancario	***		

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "CONTINUUM VENTURE PARTNERS, 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 EIGHTH DAY OF SEPTEMBER,

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 "CONTINUUM VENTURE PARTNERS, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF DECEMBER, A.D. 2021.

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

6509549 8300 SR# 20223476447

Authentication: 204347144

Date: 09-08-22