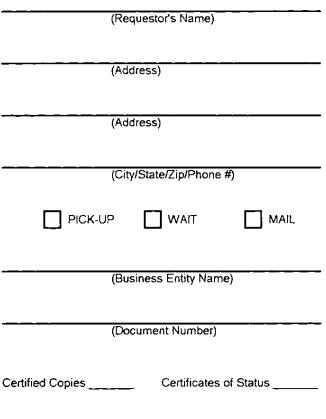
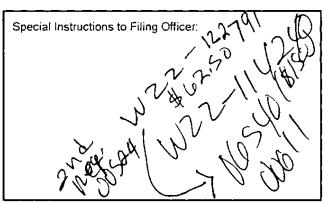
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Office Use Only



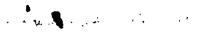
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COVER LETTER

TO: Registration Section Division of Corporation	s		
SUBJECT: Breed Science TA	١٢		
	Name of corporation - m	ust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Fo "Certificate of Existence," or "C above referenced foreign corporations."	ertificate of Good Standing	" and check are submit	
Please return all correspondence	concerning this matter to the	ne following:	
Trey Steidle			
	Name of Pers	on	
	Firm/Company	y	
170 CU 74. Arrania			, ì
129 SE 7th Avenue	Address		-,:
DelRay Beach FL, 33483			
City/State and Zip code			
trev(a)breedscience, com			- ;
E-ma	il address: (to be used for fu	iture annual report noti	fication) = \frac{\xi}{\xi}.
For further information concerni	ng this matter, please call:		Č.
Trev Steidle	at (610) €	562-7000	
Name of Person	Area Code	Daytime Telephon	e Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL	on orations
-	ORIDA DEPARTMENT OF 3.75 Filing Fee & 🔲 \$7		■ \$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.

(If name unavaila	able in Florida, enter alternate corporate name a	adopted for the purpose of transacting bus	siness in Florida)
Delaware	3.	82-2857570	
(State or country	y under the law of which it is incorporated) 3.	(FEI number, if applica	ble)
March 2 2021	5.		
(Date of incorporation)		(Date of duration, if other than perpetual)	
March 2 2021			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)	
7 <u>. 129 SE 7th Avent</u>	ie, Delray Beach, FL, 33483		
	(Principal offic	ce <u>street</u> address)	
Name:	t address of Florida registered agent: (P.O Howard Steidle III 129 SE 7th Avenue	. Box <u>NOT</u> acceptable)	
Name:	Howard Steidle III 129 SE 7th Avenue Delray Beach		· .
Name:	Howard Steidle III 129 SE 7th Avenue	<u> </u>	
Name: Office Address: O Registered age Having been nam designated in this further agree to ca	Howard Steidle III 129 SE 7th Avenue Delray Beach (City)	. Florida <u>33483</u> (Zip code) The of process for the above stated corporate as registered agent and agree to the proper and complete per	poration at the pact in this capa
Name: Office Address: O Registered age Having been nam designated in this further agree to ca	Howard Steidle III 129 SE 7th Avenue Delray Beach (City) ent's acceptance: ed as registered agent and to accept servic application, I hereby accept the appointmentally with the provisions of all statutes re	. Florida 33483 (Zip code) re of process for the above stated corporate as registered agent and agree to elative to the proper and complete pesition as registered agent.	poration at the

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 Name: Trey Steidle Name: CJ Gottuso Chairman ■ Chairman □ Vice Chairman Address: 129 SE 7th □Vice Chairman Address: 243 Lee Circle Avenue DelRay Beach FL Philadelphia, PA, 19010 Director □Director President □ President 33483 ☐ Vice President □ Vice President []Treasurer □ Secretary □ Secretary □ Treasurer □Other _____ □Other _____ []Other □Chairman Name: □Chairman Name: [] Vice Chairman Address: ______ Address: El Vice Chairman Director □ Director □President □ President □ Vice President □ Vice President **ElSecretary** ☐ Treasurer ☐ Secretary ☐ Treasurer □Other _____ ☐Other _____ □Other _____ Name: 60 □Chairman Name: □Chairman □Vice Chairman Address: Address: ____ ☐ Vice Chairman □ Director □ Director President President □Vice President _____ □ Vice President ☐Treasurer □Treasurer □ Secretary □ Secretary []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. Tray Staidle 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.

Trey Steidle, CEO, Breed Science

13.



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

DELAWARE, DO HEREBY CERTIFY "BREED SCIENCE 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-SIXTH DAY OF AUGUST, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREED SCIENCE INC." WAS INCORPORATED ON THE SECOND DAY OF MARCH, A.D. 2021.



Authentication: 204256255

Date: 08-26-22

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