F22000007152

(Re	equestor's Name)			
(Ac	idress)			
(Ac	idress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Name	e)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:			
Zec	322	,		

Office Use Only



300395485963

10/11/22--01043--007 **87.50

ZUZZ OCT 31 AM IQ: 50

M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Flae Of Company, INC. Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Jeff Kelley	
Name of Person	
The Edge Of Company, INC.	
Firm/Company	
Finn/Company 1680 Fruitville Rd # 518, Sararota FL 34236 Address	
Address	
	~
City/State and Zip code	
Teffeedgeofnft.com E-mail address: (to be used for future annual report notification)	8
E-mail address: (to be used for future annual report notification)	: 🖂
For further information concerning this matter, please call:	٠.
Jeff Kelley at 207, 263 9836	AM IO: 50
Jeff Kelley at 202 763 9836	: ১ : স
Name of Person Area Code Daytime Telephone Number	0
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	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE S70.00 Filing Fee S78.75 Filing Fee & S78.75 Filing Fee & S87.50 Filing Fee. Certificate of Status Certified Copy S87.50 Filing Fee. Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1.	(Enter name of conversion, must include WINGORDON ATTING MOON ON A TOWN A CONTRACT OF THE STATE
	(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")
	men con corp. me, co, or corp.)
	E_{1} , C_{1} , C_{2} C_{1}
	Edge of NFT, INC.
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2.	(State or country under the law of which it is incorporated) 87-2855777 (FEI number, if applicable)
	(State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	9/28/2021
	(Date of incorporation) (Date of duration, if other than perpetual)
6.	1/1/2027
	(Date first transacted business in Florida, if prior to registration)
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7	1680 Fruitville Rd #518, Sarasota Fl 34236
	(Principal office street address)
•	(Current mailing address, if different)
Q	Name and street address of Florida registered areas. (B.O. Day NOT areas 11)
ο.	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
	Name: Jeff Kelley
Of	fice Address: 1680 Frontylle Rd #518

Sorasota, Florida 34736 (City) (Zip code)

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.

(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.

	!
٠	
•	
1	~
ţ	

A. DIRECTORS						
□Chairman	Name: Jeff Kelley	□Chairman	Name: <u>E</u> C	than Ja	nney	
□Vice Chairman	Address: 1630 FroHville Rd #513	□Vice Chairman	Address: 16	RO Fruitville	2 RM#	<u>SIS</u>
⊡Director	Sarajeta, FL 34236	Director	Sa	rascta, FL	34239	6
□President		□President				
□Vice President		□Vice President			-	
☐ Secretary	☐Treasurer	Secretary		□Treasurer		
Other	Other	Other		□Other		
□Chairman	Name: Josh Kriger	□Chairman	Name:			
□Vice Chairman	Address: 1680 Fruitville Rd #518	□Vice Chairman	Address:			
Z Director	Sarwoia, FL 34236	□Director				
□President		□President				
□Vice President		□Vice President				2023
□Secretary	Treasurer	☐ Secretary		∃Treasurer		007
□Other	Other	□Other		□Other	35. _3	<u>ယ်</u>
					1	<u> </u>
□Chairman	Name:	□Chairman	Name:		· i ·	©: 5 0: 5 0: 5 0: 5 0: 5 0: 5 0: 5 0: 5 0
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	☐Treasurer	☐Secretary		□Treasurer		
□Other	□Other	□Other		□Other		
Important Notice: I	Ise an attachment to report more than six (6). The attac	houses will by income	1 6			
individuals may be	added to the index when filing your Florida Departmen	ntinent will be image it of State Annual Re	a for reporting pe port form.	irposes only. No:	n-indexed	
12.	Signature of Director or	0.07	·	-		
The officer or direc she is aware that fall s.817.155, F.S.	tor signing this document (and who is listed in number lse information submitted in a document to the Departn	11 above) affirms the nent of State constitu	at the facts stated tes a third degree	herein are true a felony as provid	and that he ded for in	or
13	Teff Kelley (Typed or printed name and capacity of person					
	(1 yped or primed name and capacity of persor	i signing application	1			

 $(x,y) = (x,y) \cdot (x,y$

STATE OF WYOMING Office of the Secretary of State

I, KARL ALLRED, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

The Edge Of Company

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **September 28, 2021**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2021-001039342**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 6th day of October, 2022 at 8:49 AM. This certificate is assigned ID Number 055607721.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website https://wyobiz.wyo.gov and following the instructions displayed under Validate Certificate.



October 25, 2022

JEFF KELLEY THE EDGE OF COMPANY, INC. 1680 FRUITVILLE RD #518 SARASOTA, FL 34236

SUBJECT: EDGE OF NFT Ref. Number: W22000132894

We have received your document for EDGE OF NFT. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Alternate Name needs a corporate suffix.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 222A00023966

Mel Solomon Senior Section Administrator

www.sunbiz.org



October 20, 2022

JEFF KELLEY THE EDGE OF COMPANY, INC. 1680 FRUITVILLE RD #518 SARASOTA, FL 34236

SUBJECT: EDGE OF NFT Ref. Number: W22000132894

We have received your document for EDGE OF NFT and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Alternate Name needs a corporate suffix.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 122A00023571

Mel Solomon Senior Section Administrator

www.sunbiz.org