

F 22 000007231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

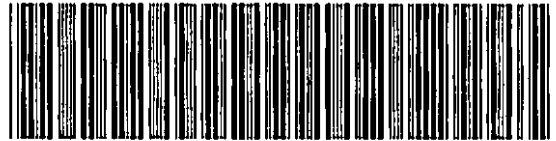
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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S. FRANKLIN

NOV 30 2022

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
Investry Management Group Inc

**SUBJECT:** \_\_\_\_\_  
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:  
Branden Wabe

_____	Name of Person	
_____	Firm/Company	
208 NE Monroe circle N 107		
_____	Address	
st petersburg FL 33702		
_____	City/State and Zip code	
brandenwabe@gmail.com		
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

Branden Wabe	727	7768999
_____	at (_____)	_____
Name of Person	Area Code	Daytime Telephone Number

**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**

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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.*

Investry Management Group Inc

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  
South Dakota 88-4223024

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

October 21, 2022

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

100 Ashley Dr S #600 Tampa, FL 33602

7. \_\_\_\_\_  
(Principal office street address)

\_\_\_\_\_  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Branden Wabe

Name: \_\_\_\_\_

100 Ashley Dr S #600

Office Address: \_\_\_\_\_

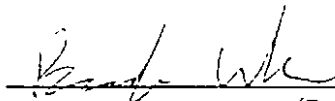
Tampa

33602

\_\_\_\_\_, Florida \_\_\_\_\_  
(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.

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

**A. DIRECTORS.**

Branden Wabe

☐Chairman Name: \_\_\_\_\_  
208 NE Monroe circle N 107  
☐Vice Chairman Address: \_\_\_\_\_  
st petersburg FL 33702  
☐Director \_\_\_\_\_  
☐President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☐Secretary ☒Treasurer  
☐Other \_\_\_\_\_ ☐Other \_\_\_\_\_

☐Chairman Name: \_\_\_\_\_  
☐Vice Chairman Address: \_\_\_\_\_  
☐Director \_\_\_\_\_  
☐President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☐Secretary ☐Treasurer  
☐Other \_\_\_\_\_ ☐Other \_\_\_\_\_

☐Chairman Name: \_\_\_\_\_  
☐Vice Chairman Address: \_\_\_\_\_  
☐Director \_\_\_\_\_  
☐President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☐Secretary ☐Treasurer  
☐Other \_\_\_\_\_ ☐Other \_\_\_\_\_

☐Chairman Name: \_\_\_\_\_  
☐Vice Chairman Address: \_\_\_\_\_  
☐Director \_\_\_\_\_  
☐President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☐Secretary ☐Treasurer  
☐Other \_\_\_\_\_ ☐Other \_\_\_\_\_

☐Chairman Name: \_\_\_\_\_  
☐Vice Chairman Address: \_\_\_\_\_  
☐Director \_\_\_\_\_  
☐President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☐Secretary ☐Treasurer  
☐Other \_\_\_\_\_ ☐Other \_\_\_\_\_

☐Chairman Name: \_\_\_\_\_  
☐Vice Chairman Address: \_\_\_\_\_  
☐Director \_\_\_\_\_  
☐President \_\_\_\_\_  
☐Vice President \_\_\_\_\_  
☐Secretary ☐Treasurer  
☐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.

12. Branden Wabe  
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.

13. BRANDEN WABE  
(Typed or printed name and capacity of person signing application)

# State of South Dakota

Office of the Secretary of State

## Certificate of Good Standing

Domestic Business Corporation

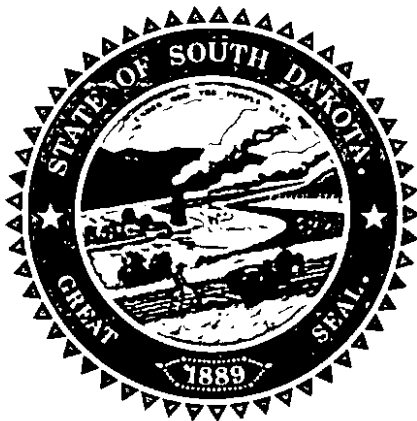
I, **Steve Barnett**, Secretary of State of the State of South Dakota, hereby certify that

**investry management group Inc.**

Business ID: DB237191

was authorized to transact business in this state on: October 21, 2022.

I, further certify that **investry management group Inc.** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, October 31, 2022.

*Steve Barnett*

**Steve Barnett**  
Secretary of State

10/31/2022 9:18 AM

Verification #: 016041721