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COVER LETTER

TO: Registratio Division of	n Section Corporations		
	HEART, INC.		
SODJECI	Name of corporation	n - must include suffix	
Dear Sir or Madam			
"Certificate of Exis	ication by Foreign Corporation for tence," or "Certificate of Good Star reign corporation to transact busin	nding" and check are submitte	
Please return all co	respondence concerning this matte	er to the following:	
Kenichi Yagi			
-	Name of	Person	· · -
Adair Myers Stevens	on Yagi PLLC		237
	Firm/Cor	npany	-1
24 Greenway Plaza,	Suite 1305		
	Addi	ress	
Houston, Texas 770-	6		,
***	City/State	and Zip code	
ky@am-law.com			1
	E-mail address: (to be used	for future annual report notifi	cation)
For further informa	tion concerning this matter, please	call:	
Kenichi Yagi	at (713 392-1092		
Name of F			Number
Registratio Division of The Centre 2415 N. M	COURIER ADDRESS: a Section Corporations of Tallahassee onroe Street, Suite 810 c, FL 32303	MAILING ADDI Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 3	on rations
Enclosed is a check Please make check p	for the following amount: syable to: FLORIDA DEPARTMEN ce S78.75 Filing Fee & Certificate of Status		\$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.

1. EVAHEART, IN	۱C.			
			" "COMPANY," "CORPORATION,"	
(If name unavaila	ble in Flori	da, enter alternate corporate name	adopted for the purpose of transacting b	ousiness in Florida)
Texas		3.	3. 46-4863676 (FEI number, if applicable)	
	y under the	law of which it is incorporated)	(FEI number, if appli	cable)
4. February 18, 20	I	5.		
(Date	of incorpora	ation)	(Date of duration, if other tha	n perpetual)
6. N.A.			. <u> </u>	
		EE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	·
7. 4900 Fournace Pl	, Suite 22 2 ,	Bellaire, Texas 77401		
		(Principal off	ice <u>street</u> address)	
				2
		(Current mailir	ng address, if different)	77
8. Name and stree	t address o	f Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	-
Name:	Jasmine i	Martinez		
Office Address:	4335 Ker	nt Avenue		ن ئ
	Titusville	·	, Florida	<u></u>
		(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.

(Rogistered 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			
Chairman	Name:	□ Chairman	Name: Yasuo Seki
□Vice Chairman	Address: 4900 Fournace Pl, Suite 222	□Vice Chairman	Address: 4900 Fournace PI, Suite 222
Director	Bellaire, Texas 77401	Director	Bellaire, Texas 77401
□President		□President	<u> </u>
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	Treasurer
□Other	Other	□Other	□ Other
□Chairman □Vice Chairman □Director ■President □Vice President □Secretary □Other □CEO	Tadashi Motomura Name: 4900 Fournace PI, Suite 222 Address: Bellaire, Texas 77401 □Treasurer □Other	□Chairman □Vice Chairman □Director □President □Vice President ■Secretary □Other	Masae Tomoda Name: 4900 Fournace PI, Suite 222 Address: Bellaire, Texas 77401 Treasurer:
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	Treasurer
Other	Other	□Other	□Other
The officer or direct she is aware that fas.817.155, F.S.	Use an attachment to report more than six (6). The an added to the index when filing your Florida Department of Directors signing this document (and who is listed in numalse information submitted in a document to the Department, CEO and President	or or Officer hber 11 above) affirms the partment of State constitution	at the facts stated herein are true and that he or

(Typed or printed name and capacity of person signing application)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



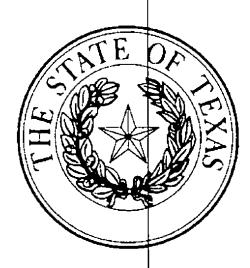
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Evaheart, Inc. (file number 801936281), a Domestic For-Profit Corporation, was filed in this office on February 18, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 05, 2022.



Phone: (512) 463-5555

Prepared by: SOS-WEB

John B. Scott Secretary of State

Come visit us on the internet at https://www.sos.texas.gov/

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 1203573490003