

F23000000546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

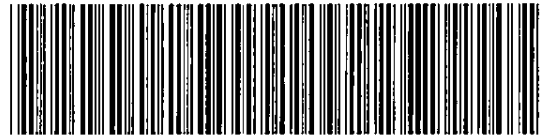
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

W23-8176
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RECEIVED

2023 JAN 23 AM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

2023 JAN 30 PM 2:25

JAN 30 2023
K. Brumley

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM ACCT: 120210000160 AMOUNT: \$ \$87.50

AUTHORIZATION:

Cadrenal Therapeutics, Inc. P22000033163



Business Name

Document Number, (if known):

☐ Walk in

☐ Pick up time

☐ Mail out

☐ Will wait ☐ Photocopy

☒ **Certified Copy of Articles of Incorporation**

☒ **Certificate of Status**

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☐ **CORP**
☐ **PLLC**

AMMENDMENTS

☒ **Amendment**
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ Revocation of Dissolution
☐ Merger
☐ **Conversion**
☐ **Amended and restated Articles**
☐ **Statement of Authority**

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership
☐ Reinstatement

☐ **APOSTIL()**
Country

☐ **Other**

EXAMINER'S INITIALS: _____



January 24, 2023

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314
Attention: Kyle D. Brumbley
Regulatory Specialist II Supervisor

Re: Cadrenal Therapeutics, Inc. (the "Company")

Dear Mr. Brumbley

Please be advised that the above referenced company was dissolved on December 13, 2022 (Document Number P22000033163) due to an error in filing domestically in Florida when the intention was to file a Qualification to do Business in Florida. The Company has filed domestically in Delaware and it will not be revoking the dissolution under any circumstances. The name "Cadrenal Therapeutics, Inc." is hereby released for use to Cadrenal Therapeutics, Inc., a Delaware corporation.

Please process the Qualification to do Business of Cadrenal Therapeutics, Inc. as soon as possible. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew Szot", with a stylized flourish at the end.

Matthew Szot
Chief Financial Officer

**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. Cadrenal Therapeutics, Inc.
(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)

2. Delaware 3. 88-0860746
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 25, 2022 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. April 8, 2022
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 822 A1A North, Suite 306, Ponte Vedra Beach, Florida 32082
(Principal office street address)

(Current mailing address, if different)

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

Name: Quang Pham

Office Address: 830 North A1A Suite 196

Ponte Vedra, Florida 32082
(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.

Quang Pham

(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]:

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AND
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A. DIRECTORS

☒ Chairman Name: Quang Pham
☐ Vice Chairman Address: 822 A1A North, Suite 306
☒ Director Ponte Vedra, Florida 32082
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☒ Other CEO ☐ Other _____

☐ Chairman Name: Matthew Szot
☐ Vice Chairman Address: 822 A1A North, Suite 306
☐ Director Ponte Vedra, Florida 32082
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☒ Other CFO ☐ Other _____

☐ Chairman Name: Douglas Losordo
☐ Vice Chairman Address: 822 A1A North, Suite 306
☐ Director Ponte Vedra, Florida 32082
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☒ Other CMO ☐ Other _____

☐ Chairman Name: John R. Murphy
☐ Vice Chairman Address: 822 A1A North, Suite 306
☒ Director Ponte Vedra, Florida 32082
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Glynn Wilson
☐ Vice Chairman Address: 822 A1A North, Suite 306
☒ Director Ponte Vedra, Florida 32082
☐ President _____
☐ Vice President _____
☐ Secretary _____ ☐ Treasurer _____
☐ Other _____ ☐ Other _____

☐ Chairman Name: Steven Zelenkofske
☐ Vice Chairman Address: 822 A1A North, Suite 306
☒ Director Ponte Vedra, Florida 32082
☐ 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. Quang Pham
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. Quang Pham
(Typed or printed name and capacity of person signing application)


Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CADRENAL THERAPEUTICS, 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-THIRD DAY OF JANUARY, A.D. 2023.

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



Jeffrey W. Bullock, Secretary of State

6564020 8300

SR# 20230215152

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202546121

Date: 01-23-23