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### **COVER LETTER**

TO: Registration Secti Division of Corpo			
SUBJECT: Starfire Jews	elry, Inc !		
		on - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence."		r Authorization to Transact Business anding" and check are submitted to r ness in Florida.	
Please return all correspor	idence concerning this matt	er to the following: イ.カリ. 知の	3
Ross & Jaime Berry			
	Name o	f Person	
Stafire Jewelry Inc DBA Th	e Ross Line		1.5
	Firm/Co	mpany	(.
5840 33rd Street			
	Add	lress	' '
Vero Beach, FL 32966			
- Verti Setteri, F. E. Z. E. V.	City/State	and Zip code	•:.
jaime@therossline.com	·	·	,
Jamegarrowane,com	E-mail address: (to be used	I for future annual report notification	1)
For further information co	ncerning this matter, please	call:	
Jaime Berry	at ( 802	) 324-6183	
Name of Person	Area Co	de Daytime Telephone Num	ber
STREET/COUR Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	on rations lahassee street, Suite 810	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	e following amount: o: FLORIDA DEPARTMEN  S78.75 Filing Fee & Certificate of Status	■ \$78.75 Filing Fee & □ \$87. Certified Copy Cert	50 Filing Fee. tificate of Status & tified 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.

<ol> <li>Starfire Jewelry</li> </ol>	Inc.l		
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	." "COMPANY," "CORPORATION,"	
The Ross Berry	Line		
(If name unavail:	able in Florida, enter alternate corporate name	adopted for the purpose of transacting bus	siness in Florida)
2. Vermont	3	26-2836324	
	y under the law of which it is incorporated)	(FEI number, if applica	ble)
4. July 2008	5		_
(Date	of incorporation)	(Date of duration, if other than p	perpetual)
6. 01/02/2023		44.4	
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
7. 1545 Bartlett Hill	Road, Jeffersonville, VT 05464		<del></del>
	(Principal of	fice <u>street</u> address)	
5840 33rd Street	, Vero Beach, FL 32966		
	(Current maili	ng address, if different)	<u>ب</u> ت
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	• • •
Name:	Jaime Berry		
Office Address:	5840 33rd Street		<b>⋉</b> ∙
		. Florida <u>32966</u>	
	(City)	(Zip code)	
Having been nam designated in this further agree to c	ent's acceptance: sed as registered agent and to accept serve application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my p	ment as registered agent and agree to relative to the proper and complete pe	act in this capacity. I
_	(Registered agent's	signature)	
10. Attached is a	certificate of existence duly authenticated	L not more than 90 days prior to deliver	ry of this application to

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: Ross Berry Name: Jaime Berry □ Chairman □ Chairman Address: 5840 33rd Street Address: 5840 33rd Street □ Vice Chairman □Vice Chairman Vero Beach, FL 32966 Vero Beach, FL 32966 □ Director Director □President ■ President □Vice President ■ Vice President **■**Treasurer □ Secretary □Treasurer □ Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: □Chairman □Chairman Name: \_\_\_\_\_ ☐ Vice Chairman □Vice Chairman Address: \_\_\_\_ Address: □ Director □ Director □ President □President □Vice President \_ □Vice President ☐Treasurer ? □Treasurer □ Secretary □ Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other\_\_\_\_ □Other \_\_\_\_\_\_ ر Name: □ Chairman □Chairman Name: □ Vice Chairman Address: □ Vice Chairman Address: \_\_\_\_\_ □ Director □ Director □President □ President □Vice President \_\_\_\_\_ □Vice President □Treasurer □ Secretary ☐Treasurer ☐ Secretary □Other □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. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) aftirms 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. Jaime Berry, VP/Treasurer

# STATE OF VERMONT OFFICE OF SECRETARY OF STATE

#### Certificate of Good Standing

I. Sarah Copeland Hanzas, Vermont Secretary of State, do hereby certify that according to the records of this office

#### STARFIRE JEWELRY, INC.

a Domestic Profit Corporation formed under the laws of the State of VERMONT, was filed for record in this office on Jun 16, 2008.

I further certify that the company has perpetual duration, that its most recent annual report is on file, and that as of this date, articles of dissolution / withdrawal have not been filed.

January 23, 2023

Given under my hand and seal of office, at Montpelier, the State Capital.

Sarah Copeland Hanzas Vermont Secretary of State

Business ID: 0129397

Certificate Number: 2014045684001