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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : NEVADA CORPORATE HEADQUARTERS, INC
Account Number : I20240000024
Phone : (800)508-1726
Fax Number : (702)514-6187

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MARRAPODI VENTURES, INC.**

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MARRAPODI VENTURES, INC.

Name of Corporation

DOCUMENT NUMBER: F23000002708

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

D. TACHIBANA

Name of Contact Person

NCH Registered Agent

Firm/Company

1450 VASSAR STREET

Address

RENO, NV 89502

City/State and Zip Code

renewals@nchinc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NCH Registered Agent

Name of Contact Person

at (800)

508-1726

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee☐ \$43.75 Filing Fee &
Certificate of Status☐ \$43.75 Filing Fee &
Certified Copy☐ \$52.50 Filing Fee,
Certificate of Status &
Certified CopyMailing Address:Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314Street Address:Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2024 MAR 14 PM 3:12

FILED

TALLAHASSEE, FL

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F23000002708

(Document number of corporation (if known))

1. MARRAPODI VENTURES, INC.

(Name of corporation as it appears on the records of the Department of State)

2. NEVADA

(Incorporated under laws of)

3. 04/28/2023

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 01/31/2024

5. MARRAPODI VENTURES, INC.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: _____, Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove

2024 MAR 14 PM 3:12

FILED

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Antonietta-Rosina Marrapodi

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Antonietta-Rosina Marrapodi

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35.00

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SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MARRAPODI VENTURES, INC.**, as a DOMESTIC CORPORATION (78) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 01/20/2022, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 03/22/2024.

FRANCISCO V. AGUILAR
Secretary of State

Certificate Number: B202403224488700

You may verify this certificate
online at <http://www.nvsos.gov>