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COVER LETTER

	ation Section on of Corporations				
SURJECT: '	Audubon Asset Holdings, Inc.				
Source I	Name of corporat	tion - must include suffix			
Dear Sir or Mac	dam:				
"Certificate of I	Application by Foreign Corporation (Existence," or "Certificate of Good S ed foreign corporation to transact bus	standing" and check are submi			
Please return al	I correspondence concerning this ma	tter to the following:			
J. Marshall Fry					
	Name	of Person	•		
J. Marshall Fry.	Attorney at Law				
•	Firm/C	Company			
2708 Alt. 19. Su	ite 604-11				
	Ac	ddress			
Palm Harbor, FL	, 34683				
	City/Stat	te and Zip code	•		
jmfryatty@gmai	Leom				
	E-mail address: (to be use	ed for future annual report not	ification)		
For further info	rmation concerning this matter, pleas	se call:			
J. Marshall Fry	Marshall Fry at (727) 785-8014 Name of Person Area Code Daytime Telephone Number				
Name	of Person Area C	Code Daytime Telepho	ne Number		
Registr Divisio The Ce 2415 N	et/Courier address: ation Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303	Registration Section Division of Corporations hassee P.O. Box 6327 reet, Suite 810 Tallahassee, FL 32314			
	neck for the following amount: ck payable to: FLORIDA DEPARTME g Fee \$78.75 Filing Fee & Certificate of Status		S87.50 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. Audubon Asset	t Holdings, Inc.				
(Enter name of "Inc" "Co" "C	corporation: must include "INCORPORATED Corp." "Inc." "Co." or "Corp.")	D," "C	OMPANY." "CORPORATIO),,"	
(If name unavai	lable in Florida, enter alternate corporate nam	ne adoj	oted for the purpose of transact	ing business in Florida)	
2. Minnesota	3	83-	4300893		
(State or country under the law of which it is incorporated)			(FEI number, if applicable)		
4. April 1, 2019		Per	petual		
(Date of incorporation)		·-	(Date of duration, if other than perpetual)		
6.					
7. 8303 Audubon E	(Date first transacted business (SEE SECTIONS 607.1501 & 607. Or., Chanhassen, MN 55317 (Principal of	1502.		lity)	
	(Current mail	ling ad	dress. if different)		
Name:	et address of Florida registered agent: (P. J. Marshall Fry, Attorney at Law 2708 Alt. 19, Suite 604-11	.O. Bo	ox <u>NOT</u> acceptable)	2023 JUL 21 F SECRETARY	
Office Address:			_		
	Palm Harbor		Florida <u></u>	AHID: 39	
	(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.

A. DIRECTORS Joseph Novogratz □ Chairman □ Chairman Name: _____ 8303 Audubon Dr. Address: □ Vice Chairman □ Vice Chairman Address: Chanhassen, MN 55317 Director □Director □President □ President □ Vice President ☐ Vice President □Treasurer **■**Secretary □Treasurer ☐ Secretary CFO Other Other ____ □Other _____ Name: _____ □ Chairman □ Chairman Name: _____ □Vice Chairman Address: _____ □ Vice Chairman Address: □ Director □ Director □President □ President □Vice President □ Vice President □ Secretary □Treasurer ☐ Secretary ☐ Treasurer □Other _ Other _____ Other ____ □Other _____ □ Chairman Name: _____ □ Chairman Name: _____ Address: _____ □ Vice Chairman Address: _____ □ Vice Chairman □ Director □Director □ President □President □Vice President ____ ☐Vice President □ Secretary □Treasurer □ Secretary ☐ Treasurer □ 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 fitting 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) 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.

Joseph Novogratz, Dir., CEO, CFO, and Secy.

Office of the Minnesota Secretary of State Certificate of Good Standing

I. Steve Simon. Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Audubon Asset Holding Inc.

Date Filed: 04/01/2019

File Number: 1078057600020

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 07/17/2023

Here Pimm

Steve Simon

Secretary of State State of Minnesota