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(Re	equestor's Name)	
(Ac	ddress)	
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(Cı	ty/State/Zip/Phon	e #)
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(Do	ocument Number)	)
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#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Investment.com, Inc.	
Name of co	prporation - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corpor "Certificate of Existence," or "Certificate of Cabove referenced foreign corporation to transactions."	ration for Authorization to Transact Business in Florida," Good Standing" and check are submitted to register the act business in Florida.
Please return all correspondence concerning the	nis matter to the following:
Rosemary Mason	
	Name of Person
Traverse Legal, PLC	
i	Firm/Company
600 Congress Avenue FL 14	
	Address
Austin, TX 78701	
Cir	y/State and Zip code
rosemary@traverselegal.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	, please call:
Stephen Aarons	512 695-5129
Name of Person	Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPAR  \$70.00 Filing Fee	e & □ \$78.75 Filing Fee & ■ \$87.50 Filing Fee,

#### 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.

Investment.co				
(Enter name of "Inc.," "Co.," "	Corporation; must include "IN Corp," "Inc," "Co," or "Corp."	CORPORATED," "C	COMPANY." "CORPORATION	", ис
InvestmentCa	shFlow, Inc.			
(If name unava	ilable in Florida, enter alternate	e corporate name adop	oted for the purpose of transact	ing business in Florida)
2. Delaware		3 707	75851	
	ntry under the law of which it is	s incorporated)	(FEI number, if	applicable)
410/07/2022		5.		
(Da Industrious 6.	ite of incorporation)		(Date of duration, if othe	r than perpetual)
	(Date first tran (SEE SECTIONS 66 Ave, FL 10, Miami, FL 33131	nsacted business in Flo 107.1501 & 607.1502,	rida, if prior to registration) F.S., to determine penalty liab	ility)
/		(Principal office si	reet address)	
<del></del>		(Current mailing ad	dress, if different)	
8. Name and str	eet address of Florida registe	ered agent: (P.O. Bo	ox <u>NOT</u> acceptable)	2023 :
Name:	CT Corporation System			The second
Office Address:	1200 South Pine Island Ro	oad	_	2023 SEP 18 AH11: 09
	Plantation		Florida 33324	
	(City)		, Florida 33324 (Zip code)	1: 09
Having been nad designated in the further agree to	gent's acceptance: med as registered agent and is application, I hereby acce comply with the provisions ir with and accept the obliga	ept the appointment of all statutes relati	as registered agent and ag we to the proper and compl n as registered agent.	1
	Stephone Honey	Assistant Sec		

(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.

#### DocuSign Envelope ID: AD44BE67-ADAC-4C96-85E2-01B3CC417C6C A. DIRECTORS Name: Chris Sasso □ Chairman Chairman 1111 Brickell Ave. FL 10 ☐ Vice Chairman Address: □Vice Chairman Address: \_\_\_\_ Miami, FL 33131 **■**Director □ Director ■ President □ President □ Vice President □Vice President **■**Secretary **■**Treasurer □Secretary □Treasurer Other CEO □Other \_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_ □ 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 \_\_\_\_\_ □ 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 \_\_\_\_ 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.

			•	•	
	DocuSigned by.				
12	11.0				
	CULTIS SASSO	Signature of 1	Director or Officer	-	
	488F80810C5045D		once of 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.

Chris Sasso, President and CEO

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "INVESTMENT.COM, 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 TWELFTH DAY OF SEPTEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INVESTMENT.COM, INC." WAS INCORPORATED ON THE SEVENTH DAY OF OCTOBER, A.D. 2022.

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

Authentication: 204149268

Date: 09-12-23

7075851 8300

SR# 20233473844

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



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Chris Sasso		, do hereby certify
(Name)		
that this Resolution of the Board of Directors of Investr	ment.com, Ir	IC.
(Name of Corporat	ion)	
a corporation duly organized and existing under the laws of	Delaware	
	(State or Cour	ntry)
was adopted on September 12, 2023		, adopting the alternate
		adopting the antimate
name of InvestmentCashFlow, Inc.		
(Alternate Name) NOTE: Mus	st contain a corporate si	ıffix)
for use in Florida as its real name is unavailable in Florida.		
9/14/2023 Date:		
DocuSigned by:		
Clinis Sasso	Director	
Signature of Chairman, Vice Chairman of the Board, a director or any officer	Title o	f person signing

#### FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314