Division of Corporations

Florida Department of State Division of Cornorate

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Fax Number

: (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

**Enter	the	email a	address	for	this	busin	ess	entity	to	be	used	for	fut	ure
a	nnual	report	mailin	gs.	Enter	only	one	email	add	ress	ple	ase.	**	<u></u>

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION FOXHILL CAPITAL MANAGEMENT INC.

Please adjust fees to reflect a total of \$378.75 (no \$500 penalty fee for profit corps. Thanks! ----->

Certificate of Status	0
Certified Copy	1
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COVER LETTER

	stration Sectionion of Corporation				
SUBJECT:	Foxhill Capit	al Management Inc.			
SOBJECT.		Name of corpor	ation - r	nust include suffix	·
Dear Sir or M	ladam:				
"Certificate of	f Existence,"	by Foreign Corporation or "Certificate of Good or poration to transact by	Standin	thorization to Transact g" and check are subm n Florida.	Business in Florida," itted to register the
Please return	all correspond	ence concerning this n	atter to	the following:	
Neil Weiner				-	
		Nair	e of Per	SON	
Foxhill Capita	l Management	nc.			
		Firm	'Compai	ny	*
2141 A1A Alt	., Suite 450				
			Address		
Jupiter, FL 33	477				
		City/St	ate and	Zip code	
neil@foxhille:	apital.com				
		E-mail address: (to be u	sed for	future annual report not	rification)
For further in	formation con	ceming this matter, ple	ase call:		
Neil Weiner		at (⁵⁶ 1)	335-5330 Daytime Telepho	
Nam	e of Person	Area	Code	Daytime Telepho	ne Number
Regis Divis The 0 2415	stration Section ion of Corpora Centre of Talla	ntions hassee rect, Suite 810		MAHLING AD. Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations
	ieck payable to:	following amount: FLORIDA DEPARTM \$78.75 Filing Fee & Certificate of Status	□ \$ ³	F STATE 78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status of Certified Conv.

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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.

Foxhill Capital (Enter name of o	corporation; must include "INCORPORATED,"	"COMPANY," "CORPORATION	*1		
"lnc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")		•		
(If name unavail	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacting	business in Florida)		
Delaware		20212514010			
(State or count	y under the law of which it is incorporated)	(FEI number, if app	licable)		
06/24/2021	5				
(Date	of incorporation) 5	(Date of duration, if other th	nun perpetual)		
06/24/2021					
ZIGLATA AR S	luite 450 Juniter FL 33477				
2141 ATA AR., 8	· · · · · · · · · · · · · · · · · · ·	street address)			
2141 ATA AIC. S	(Principal office	e street address) address, if different)			
	(Principal office	address, if different)	2023 SE		
	(Principal office	address, if different)	2023 OC I		
Name and stre	(Principal office (Current mailing et address of Florida registered agent: (P.O.	address, if different)	2023 OC 1 - 2 \$\frac{2}{1}\text{ALL} \text{ALL} \text{ALL}		
. Name and stre	(Principal office (Current mailing et address of Florida registered agent: (P.O. Capitol Corporate Services, Inc.	address, if different)	SECRETATION OF STATE TALLANASSES FL		

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.

Kim Tadlock, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

(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.

□Chairman	Neil Weiner			H230003460	
	Name: 2141 A1A Alt.	□Chairman	Name:		
□Vice Chairman	Address:	Dvice Chairman	Address:		
Director	Suite 450	Director			
□President	Jupiter, I-L 33477	President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□ Secretary		□ Treasure:	
Other CEO	Other			□Other	
□Chairman	Name:	DChairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		Director			
□President		□President			
□Vice President		□ Vice President			
Secretary	□ Treasurer	☐ Secretary		□Treasurer	
Other		Other		□ Other	
□Chairman	Name:	——— □Chai⊓nan	Name:		
□Vice Chairman	Address:	□ Vice Chairman	Address:		
Director		Director			
□President		□President			
□Vice President		□ Vice President			
Secretary	☐ Treasurer	☐ Secretary		☐ Treasurer	
Other	Other	🗆 Other		COther	
mportant Notice: l	Jse an attachment to report more than six added to the index when filing your Floriday.	(6). The attachment will be image da Department of State Annual Re	d for reporting port form.	purposes only. Non-indexed	
12. <u>Mil Wei</u>	ner	of Director or Officer			
47EB1EEE27	5F4E6 Signature	of Director or Officer			

(Typed or printed name and capacity of person signing application)

s.817.155, F.S.

Neil Weiner Director/CEO

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Page 1

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

DELANARE, DO HEREBY CERTIFY "FOXHILL CAPITAL MANAGEMENT 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 SECOND DAY OF OCTOBER, A.D.

2023.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FOXHILL CAPITAL MANAGEMENT INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JUNE, A.D. 2021.

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

6018828 8300
SR# 20233623339
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204283189

Date: 10-02-23