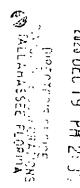
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(Ad	idress)	
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(,,	
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
·		
(Do	ocument Number)	
Certified Copies	Certificates (of Status
		·
Special Instructions to Fili	ng Officer.	

Office Use Only



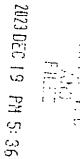
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RECEIVED

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EFIZBO Inc.	' 1
Please Debit FCA000000003 For: 70	
Thank you Seth Neeley	
1.4.	
Hely	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Scarch
,	Officer Search
	Fictitious Search
- DOG/	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC II Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

Division of Corporations		
SUBJECT: efizbo Inc.		
Na	ame of corporation -	must include suffix
Dear Sir or Madam:		
	icate of Good Stand	uthorization to Transact Business in Florida." ing" and check are submitted to register the s in Florida.
Please return all correspondence con-	cerning this matter t	o the following:
Jordan Cesana		
	Name of P	erson
DarrowEverett		
-	Firm/Comp	any
One Turks Head Place, Suite 1200		
	Addres	S
Providence, RI 02903		
	City/State and	d Zip code
jcesana@darroweverett.com		
E-mail add	dress: (to be used fo	r future annual report notification)
For further information concerning th	nis matter, please ca	II:
Jordan Cesana 401 453-1200 at ()		453-1200
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDI Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
	A DEPARTMENT O	DF STATE \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certificate of Status Certified Copy

EFIZBO, LLC 5137 Castello Dr. # 2 Naples, FL 34103

November 27, 2023.

Florida Department of State Division of Corporations 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

RE: Consent to Use of Name

To Whom It May Concern:

The undersigned, James P. Schlimmer, as the CEO and Manager of EFIZBO, LLC, a Florida limited hability company (Document Number L20000023443), hereby approves, gives permission, and consents to the use and registration of the name "EFIZBO, Inc." to EFIZBO, Inc., a Delaware corporation and an affiliate of EFIZBO, LLC, as a Florida foreign corporation for all purposes within the state of Florida.

Thank you for your attention to this matter.

EFIZBO, LLC	
a Florida limited lightlity company	
Bv: / P //	
Name James P. Septimmer	
hs/CEO	

STATE OF FLORIDA COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this November 27th, 2023, b	y James	; P.	
Schlimmer as the CEO of EFIZBO, LLC.	_	2(
Signature of Notary Public Print, Type/Stamp Name of Notary (Seal) MAX R. HEPBURN MY COMMISSION # HH 300020 EXPIRES: January 5, 2027	.· <u>.</u>	2023 DEC 19	
Personally known:X		PH 5:	

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.

(If name unavail	able in Florida, enter alternate corporate	e name adopted for the purpose of transacting business in Flor	-ida)
Delaware	·	02.4000500	,
(State or countr	y under the law of which it is incorporate	tted) (FEI number, if applicable)	
December 14, 2			
(Date	of incorporation)	5(Date of duration, if other than perpetual)	
6.			
		siness in Florida, if prior to registration) 2 607.1502, F.S., to determine penalty liability)	
7. 5137 Castello Dr	ive # 2, Naples, Florida 34103		
^ · · <u> </u>		pal office street address)	
8. Name and <u>stree</u> Name:	(Current et address of Florida registered agent Corporation Service Company	t mailing address, if different) t: (P.O. Box NOT acceptable)	
	1201 Hays Street	ب ب	ņ `
Office Address:	Tallahassee	. Florida <u>32301</u>	
Office Address:		. Florida	
Office Address:	(City)	(Zip code)	
9. Registered ag Having been nam designated in this further agree to c	ent's acceptance: led as registered agent and to accept application, I hereby accept the applications of all states with and accept the obligations of	(Zip code) of service of process for the above stated corporation at opointment as registered agent and agree to act in this continues relative to the proper and complete performance of	capacity. I

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				
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address: 5137 Castello Drive # 2	□Vice Chairman	Address:	
Director	Naples, Florida 34103	□Director		
□President		□President		
□Vice President		□ Vice President		
■ Secretary	T reasurer	□ Secretary		□Treasurer
■Other	□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	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
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. 12. **Table 12 **Table 10 **Table 1				
she is aware that fa s.817.155, F.S.	ctor signing this document (and who is listed in number alse information submitted in a document to the Departm	11 above) aftirms th nent of State constitu	nat the facts stated ites a third degree	herein are true and that he or felony as provided for in
James P. Sc	chlimmer			

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EFIZBO 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 FIFTEENTH DAY OF DECEMBER, A.D. 2023.

Authentication: 204824897

Date: 12-15-23