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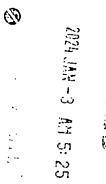
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### **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJE	ECT: Sugar Beets Inc			
OU BOL	Name	of corporation -	must include suffix	
Dear Si	r or Madam:			
"Certifi	closed "Application by Foreign C cate of Existence," or "Certificat eferenced foreign corporation to	e of Good Standi	ng" and check are subm	Business in Florida," itted to register the
Please	return all correspondence concert	ning this matter to	the following:	
Jacilyn .	Jolly			
	<u></u>	Name of Pe	rson	
Integrita	as Counsel			
		Firm/Compa	ıny	
P.O. Bo	x 10786			
		Address	<u> </u>	
Tampa,	FL 33679			
		City/State and	Zip code	
jaci@in	tegritascounsel.com			
	E-mail addre	ss: (to be used for	future annual report no	tification)
For fur	ther information concerning this	matter, please cal	1:	
Jacilyn	Jolly	813	417-4093	
	Name of Person	Area Code	) 417-4093 Daytime Telepho	one Number
	STREET/COURIER ADDRE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Please r	ed is a check for the following armake check payable to: FLORIDA I	DEPARTMENT ( ing Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 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.

(If name unavails	ble in Florida, enter alternate comorate name	adonted for the nurnose of transacti	ng business ir	Florida	
New York	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida 46-5618364				
	or country under the law of which it is incorporated)		(FEI number, if applicable)		
May 9, 2014	•	•	•		
	of incorporation) 5.	(Date of duration if other	(Date of duration, if other than perpetual)		
12/1/23	or incorporation)	(Date of duration, if other than perpetual)			
<del></del>	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 eet, 7th Floor, New York, NY 10013	n Florida, if prior to registration) 502, F.S., to determine penalty liabi	lity)		
107 Editajono ed		ice street address)		<u></u> .	
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Name and stree	` .	ng address, if different)	<i>0</i> 29		
	(Current mailin	ng address, if different)	C3	2024	
Name:	(Current mailing and a continuous (Current mailing) (Current mailing) (Current mailing) (Current mailing) (Current mailing)	ng address, if different)	03	2024 JA	
Name:	(Current mailin	ng address, if different)  D. Box <u>NOT</u> acceptable)	029	2024 JAN - :	
	(Current mailing that address of Florida registered agent: (P.C.)  Marquis W. Heilig  1227 N. Franklin Street  Tampa	ng address, if different)  D. Box NOT acceptable) , Florida 33602		7024 JAN -3 /	
Name:	(Current mailinest address of Florida registered agent: (P.C. Marquis W. Heilig 1227 N. Franklin Street	ng address, if different)  D. Box <u>NOT</u> acceptable)	039	2024 JAN -3 AN 5:	

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

Chairman   Name:	
	_ <b>_</b>
□ Director □ President □ Vice President □ Vice President □ Secretary □ Treasurer □ Other □ □ Ot	
□Vice President □Secretary □Treasurer □Other □Other □Other □Other □Other	
□Secretary         □Treasurer         □Secretary         □Treasurer           □Other         □Other         □Other         □Other	
CEO □Other □Other □Other □Other	
■Other UOther UOther	
□Chairman Name: □Chairman Name:	
□Chairman Name: □Chairman Name:	
	—
□ Vice Chairman Address: □ □ Vice Chairman Address: □	
DirectorDirector	—
□ President □ Pre	
□ Vice President □ Vic	
☐ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer	
□Other □ □Other □Other □Other	
☐Chairman Name: ☐Chairman Name:	
□Vice Chairman Address: □ □Vice Chairman Address: □ □Vice Chairman □ □Vice Chairman □ □Vice Chairman □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
□ Director □ □ □ Director □	
□ President □ Pre	—
□ Vice President □ Vic	
☐Secretary ☐Treasurer ☐Secretary ☐Treasurer	
□Other □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.	į
12. 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 has 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.	e or
13. Benjamin Sormonte CEO  (Typed or printed name and capacity of person signing application)	

#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** 

SUGAR BEETS INC

DOS ID Number:

4574992

Entity Type:

DOMESTIC BUSINESS CORPORATION

**Entity Status:** 

EXISTING

Date of Initial Filing with DOS:

05/09/2014

Statement Status:

CURRENT

Statement Due Date:

05/31/2022

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on November 03, 2023 at 10:08 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C. Hughan

By Brendan C. Hughes

**Executive Deputy Secretary of State** 

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