(Re	questor's Name)				
(Address)					
(Ad	dress)				
(City	y/State/Zip/Phone	e #)			
☐ ЫCK-NЪ	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: STACEBURIAL. c Name of corporation - 1	om eorroration
realite of corporation i	must merude surrix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Au "Certificate of Existence," or "Certificate of Good Standir above referenced foreign corporation to transact business	ng" and check are submitted to register the
Please return all correspondence concerning this matter to	the following:
• •	_
Steven Ferri	<u>s</u>
Name of Per	
SPACEBURIAL CON	M CORPORATIO
Firm/Compa	
3004 SE Jetterso	~ 2 <i>f</i>
Address	
Statel 3	4997
City/State and	Zin coda
C - City/State and	1 - 1
E-mail address: Tto be used for	future annual report notification)
For further information concerning this matter, please call	:
51 5. 013	
I teven tecns at (917)	471-0630
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
The Centre of Tallahassee	Division of Corporations P.O. Box 6327
2415 N. Monroe Street, Suite 810	Tallahassee, FL 32314
Tallahassee, FL 32303	
Enclosed is a check for the following amount:	
Please make check payable to: FLORIDA DEPARTMENT O	FSTATE
	78.75 Filing Fee & \$87.50 Filing Fee.

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.

"Inc.," "Co.," "Cor	poration; must include "INCORP p." "Inc." "Co," or "Corp.")	•	-	
(If name unavailab	le in Florida, enter alternate corpo	orate name adopted for the pur	pose of transacting bus	siness in Florida)
2. <b>Dr</b> \	awa. L	3		
(State or country	under the law of which it is incor	porated) (	FEI number, if applica	ble)
4. Aug.	10, 202	<b>3</b> 5		
(Date of	rincorporation)	(Date of	duration, if other than p	perpetual)
6 <b>_</b>	want in A	maraya) +	o Tran	sach
	(Date first transacted	business in Florida, it prior to 1 & 607.1502, F.S., to determ	registration)	<del></del>
7. <u>810</u> ;	5 Canave	ral Blud		
	(14	incipal office street address)	.1	
	pe Carav.	rent mailing address, if different	ent)	32920
	•			2021 SE
8. Name and street a	address of Florida registered a		ptable)	器音型
Name:	Steven 7	21115		
Office Address:	3004 SE J	etterson S	$\mathcal{F}$	700
	57:7			
-	(City)	, Florida	Zip code)	
	` `,	(1	tp code)	ांचर्र 🚾
9. Registered agent Having been named	t's acceptance: f as registered agent and to ac	cant caming of process for	tha abour stated some	
designated in this ap	oplication, I hereby accept the	appointment as registered	agent and agree to	act in this capacity. I
further agree to con	uply with the provisions of all	statutes relative to the proj	per and complete per	formance of my dutie
ina i um jamiii <b>a</b> r w	ith and accept the obligations	oj my position as registere	d agent.	
	111	Ţ		
	\ <del></del>	1.		
<del></del>	(Registered	d agent's signature)		

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

A. DIRECTORS				• •			
Chairman	Name: Steven Ferr	\hairman	Name:				
,	Address: 3004 SE						
Director	Jettersonst	□Director					
President	Stuart, Fl	□President					
☐Vice President	34997	□Vice President					
□Secretary	□Treasurer	☐ Secretary		☐Treasurer			
□Other	Other	□Other		□ Other			
			•	•			
□Chairman	Name:	□ Chairman ·	Name:	<u> </u>			
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director	· · · · · · · · · · · · · · · · · · ·	□Director	-				
□President		□President		·			
☐ Vice President	·	□Vice President		·			
☐ Secretary		☐ Secretary		☐Treasurer			
□Other	Other	Other		Other			
			,				
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director	<u> </u>	□ 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 aling your Florida Department of State Annual Report form.  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 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.

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY THAT "SPACEBURIAL.COM CORPORATION" IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN

CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW

AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TENTH DAY OF AUGUST,
A.D. 2023, AT 11:06 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE CORPORATION IN

QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING MADE ANY

CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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



Jeffrey W. Buflock, Secretary of State

Authentication: 202589895