

F 24000001289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

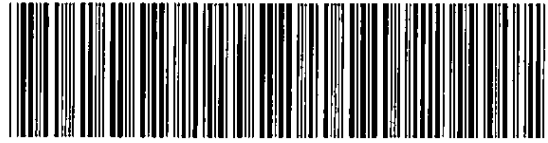
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 MAR -7 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FL

RR



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2024

RENAN FERNANDES
3702 SIR ANDREW STREET
ORLANDO, FL 32835 US

SUBJECT: EITREE, INC.
Ref. Number: W24000003982

We have received your document for EITREE, INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

STANTON H ROBERTS
Regulatory Specialist III

Letter Number: 324A00000770

RECEIVED

MAR - 7 2024

COVER LETTER

TO: Registration Section
Division of Corporations
Eitree, Inc.

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
Renan Fernandes

Name of Person
Eitree, Inc.

Firm/Company
3702 Sir Andrew Street

Address
Orlando, FL 32835

City/State and Zip code
renan@eitree.dev

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wladimir Ribeiro Junior 385 424-3487
_____ at (_____) _____
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 DEPARTMENT OF STATE**

\$70.00 Filing Fee \$78.75 Filing Fee & \$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.

Eitree, Inc

1.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
Delaware

2.

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

08/30/2023

4.

(Date of incorporation)

5.

(Date of duration, if other than perpetual)

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

3702 Sir Andrew Street, Orlando, FL, 32835

7.

(Principal office street address)

(Current mailing address, if different)

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2024 MAR - 7 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FL

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Renan Fernandes

Name: _____

3702 Sir Andrew Street

Office Address: _____

Orlando

32835

_____, Florida _____
(City) (Zip code)

9. Registered agent's acceptance:

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.

DocuSigned by:

Renan Fernandes

01:0B95ESC776410

(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.

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

A. DIRECTORS

Chairman Name: Wladimir Ribeiro Junior
5404 Millenia Lakes Blvd Apt 1206

Vice Chairman Address: _____
Orlando, FL 32839

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Renan Fernandes
3702 Sir Andrew Street

Vice Chairman Address: _____
Orlando, FL 32835

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Tony Allen
2855 Ponkan Summit Dr.

Vice Chairman Address: _____
Apopka, FL 32712

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

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. Renan Fernandes
DocuSigned by: _____
010895E5C776410 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.

Renan Fernandes

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EITREE, 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 TENTH DAY OF FEBRUARY, A.D. 2024.




Jeffrey W. Bullock, Secretary of State

7651212 8300

SR# 20240246877

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

Authentication: 202785586

Date: 02-10-24