F24000001680

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
				
ua)	siness Entity Nam	ie)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

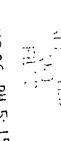
Office Use Only



800422714218

2024 HAR 26 AM 9: 2

2024 HAR 26 PH 5: 15



MAR 26 2024 K. Brumbley

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 03/26/2024	_		**WALK IN**
ENTITY NAME EDGI	LITY INC.		
DOCUMENT NUMBER			
	PLEASE FILE THE	FATTACHED AND RETURN	
xxxxxxxx	Plain Copy		
	Certified Copy		
	Certificate of Status		
	Certified Copy of Arts of Certificate of Good Stand		
	APOSTILLE' / NO	OTARIAL CERTIFICATION	
COUNTRY OF DESTIN	ATION		
NUMBER OF CERTIFIC	CATES REQUESTED		
TOTAL OWED \$70		ACCOUNT #: 120160000	072
		SRAM	
Plance call Time at	the ahove number for a	ny issues or concerns. Thank you	seo much!
, rough data , ma as	the above manager yer as	y some of contact that	

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 unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting bu	usiness in Florida)	
Dalawara		81-2519311 (FEI number, if applie		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applie	able)	
December 31, 2	020			
(Date of incorporation) 5.		(Date of duration, if other than	(Date of duration, if other than perpetual)	
December 31, 2	020			
		Florida, if prior to registration) 602, F.S., to determine penalty liability)		
4247 W. Bay to I	Bay Blvd., Tampa, FL 33629			
	(Principal offi	ce <u>street</u> address)		
	(Current mailie	g address, if different)		
	(Current manin	g address, if different)	202	
Name and stree	et address of Florida registered agent: (P.C). Box NOT accentable)	<u>-</u>	
	Balaji Ramadoss	,	2024 HAR 26	
Name:			o (
ffice Address:	4247 W. Bay to Bay Blvd.		PH	
	Tampa	, Florida 33629	. — ````	
	(City)	(Zip code)	. 25	
aving been nam signated in this rther agree to c	ent's acceptance: ed as registered agent and to accept servic application, I hereby accept the appointm omply with the provisions of all statutes re with and accept the obligations of my po	nent as registered agent and agree to elative to the proper and complete p	o act in this capacity.	
	Balaji Rami	adoss		
	Galaii Rami	adoss		
_	- Coolings / Coolings		_	

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.

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

A. DIRECTORS Balaji Ramadoss Heather Ramadoss Name: □ Chairman Name: □ Chairman 4247 W. Bay to Bay Blvd. 4247 W. Bay to Bay Blvd. ☐ Vice Chairman □Vice Chairman Address: Address: Tampa, FL 33629 Tampa, FL 33629 **■** Director Director □ President ■ President □Vice President ☐ Vice President ☐ Secretary ☐ Treasurer **■** Secretary □ Treasurer CEO _ □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 □Treasurer ☐ Treasurer □ Secretary □ Secretary □ 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. Balaji Ramadoss 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. Balaji Ramadoss

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EDGILITY 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 TWENTY-FIFTH DAY OF MARCH, A.D. 2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EDGILITY INC."

WAS INCORPORATED ON THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2020.

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

Authentication: 203105439

Date: 03-25-24

4591841 8300 SR# 20241155454