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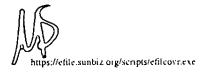
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APR 0 5 2024

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.

(Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office street address) (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: (Corporate Creations Network Inc. (City) North Palm Beach (City) (City) (City) (Date of duration, if other than perpetual)				
(State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office street address) (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) Provide address acceptance: (City) Provide address acceptance: (Figure 1 address acceptance)	•	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in	Florida)
(Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office street address) (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: (Corporate Creations Network Inc. (City) North Palm Beach (City) (City) (City) (City) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual)		3		<u> </u>
(Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 728 Ramsgate Drive, Annapolis, MD 21403 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. 801 US Highway I North Palm Beach Florida 33408 (City) Registered agents agents Registered agent Registered agent		y under the law of which it is incorporated)	(FEI number, if applicable)	1
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 728 Ramsgate Drive, Annapolis, MD 21403 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporate Creations Network Inc. 801 US Highway 1		5.		
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North Palm Beach (City), Florida 33408 (Zip code)	-	(Current mailing		20
North Palm Beach (City) (City) Registered agent's acceptance: wing been named as registered agent and to accept service of process for the above stated corporation at the plant is acceptance.	Name and stree	(Current mailing et address of Florida registered agent: (P.O.		2024 A
(City) (Zip code) (Zip code)	Name and street	(Current mailing et address of Florida registered agent: (P.O. Corporate Creations Network Inc.		2024 APR -
Registered agent's acceptance:	Name and street	(Current mailing et address of Florida registered agent: (P.O. Corporate Creations Network Inc.	Box <u>NOT</u> acceptable)	2024 APR -4
Registered agent's acceptance:	Name and street	(Current mailing et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach	Box <u>NOT</u> acceptable) —— Florida 33408	2024 APR -4 AM
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signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacite the agree to comply with the provisions of all statutes relative to the proper and complete performance of my d I am familiar with and accept the obligations of my position as registered agent. **Revir Duteau*, Special Secretary**	Name and street Name: fice Address: Registered againing been names signated in this other agree to contact the street agree the street agree to contact the street agree t	(Current mailing et address of Florida registered agent: (P.O. Corporate Creations Network Inc. 801 US Highway I North Palm Beach (City) ent's acceptance: red as registered agent and to accept service application, I hereby accept the appointm comply with the provisions of all statutes re	Box NOT acceptable) , Florida 33408, Florida (Zip code) The of process for the above stated corporation as registered agent and agree to act in the lative to the proper and complete performantion as registered agent.	on at the p

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

			1				
A. DIRECTORS	David Welch		Julia Sakala				
□Chairman	Name:	□Chairman	Name: Julie Sokola				
□Vice Chairman	Address:	□Vice Chairman	Address: 3728 Ramsgate Drive,				
□Director	Annapolis, MD 21403	□Director Annapolis, MD 21403					
President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	Secretary	□Treasurer				
□Other	Other	□Other	Other				
□Chairman	Name:	□Chairman	Name:				
	Address: 3728 Ramsgate Drive,	□Vice Chairman	3728 Ramsgate Drive.				
□Director	Annapolis, MD 21403	□Director	Annapolis, MD 21403				
□President		□President					
□Vice President		□Vice President					
Secretary	□Treasurer	□Secretary Senior	Treasurer				
□Other	Other	■Other Vice Pr	resident 🗆 Other				
	Name: Maria Welch						
□Chairman		□Chairman					
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director	Annapolis, MD 21403	□Director					
□President		□President	<u> </u>				
■Vice President		□Vice President					
☐ Secretary	□Treasurer	□Secretary	☐ Treasurer '				
□Other	Other	Other	Other				
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	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.							
13. Kevin Dutea	au, Attorney-in-Fact						
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STATE OF MARYLAND Department of Assessments and Taxation

I. MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT RAMSGATE ASSET MANAGEMENT, INC. (D24147761), INCORPORATED JUNE 23, 2023, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL.

ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS APRIL 01, 2024.

Michael L. Higgs

Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

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