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COVER LETTER

TO: Re	gistration Section vision of Corporations						
SUBJEC'	T: ULPIA Inc.						
Name of corporation - must include suffix							
Dear Sir o							
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 rett	um all correspondence concerning this matter to	the following:					
Taylor Cas			<u> </u>				
	Name of Per	son					
Bochner P	LLC						
	Firm/Compar	ıy					
100 S. Ash	tley Drive Suite 600						
	Address						
Tampa, Flo	orida 33602						
	City/State and	Zip code					
tcassidy@	bochner.law						
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Taylor Cas	ssidy at (813)	421-3883 Daytime Telephone					
	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		Registration Section Division of Corpor P.O. Box 6327	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 \$\Boxed{\text{S70.00 Filing Fee}} \Boxed{\text{S78.75 Filing Fee}} \Boxed{\text{S78.75 Filing Fee}} \Boxed{\text{S87.50 Filing Fee}} \Boxed{\text{S87.50 Filing Fee}} \Boxed{\text{S87.50 Filing Fee}} \Boxed{\text{Certificate of Status}} \Boxed{\text{Certificate of Status}} \Boxed{\text{Certified Copy}} \Boxed{\text{Certified Copy}}							

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH NECTION WITE MIRE FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO THANSACT BUSINESS IN THE STATE OF FLORIDA.

U1.PIA Inc		. .	··		
	corporation; must include "INCORPORA Corp." "Inc." "Co." or "Corp.")	TED," "C	OMPANY," "CORPORATION	I,"	
(If name unavai	lable in Florida, enter alternate corporate (name adop	ted for the purpose of transactin	g business in l	Florida
Delaware	·	93-4943349			
Type or count	e or country under the law of which it is incorporated) (FEI number, if a		plicable)		
October 27, 202					
(Date of incorporation)		. '	(Date of duration, if other than perpetual)		
2504 Silvermoss	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 Drive, Wesley Chapel, Florida 33544		rida, if prior to registration) F.S., to determine penalty liabilit	y)	
		office st	reet address)		720
1936 Bruce B. Downs Blvd, Suite 483, Wesley Chapel, FL 33544			:	2024 f.P.S	
	(Current n	nailing add	dress, if different)		5.5
				- •	L C
Name and stre	et address of Florida registered agent:	(P.O. Bo	x NOT acceptable)		هند.
Name:	Stanton IP Law Firm, P A				
ffice Address:	100 S. Ashely Drive, Suite 600		•	-	ري زر
		- · · · ·	•		σ
	Tampa		. Florida 33602		

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.

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.

(Registered agent's signature)

^[1] 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:	□ Chairman	Name:	
□Vice Chairman	Address:	[]Vice Chairman	Address:	
Director	Wesley Chapel, Florida 33544	□Director		
President		□President		
☐Vice President		□Vice President		
Secretary	□Treasurer	Secretary		Treasurer
Other	Other	Other		Other
□Chairman □Vice Chairman	Name:	□Chairman		
□Director		□Director	<u> </u>	
□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		
Secretary	☐ Treasurer	☐ Secretary		□Treasurer
□Other	□Other	□Other		□Other
12	Use an attachment to report more than six (6). The assessment to the index when filing your Florida Depart Signature of Director ector signing this document (and who is listed in number false information submitted in a document to the Depart of Arrant	ment of State Annual R or or Officer above) affirms to	eport form.	ed herein are true and that he or

The second second

Page 1



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

DELAWARE, DO HEREBY CERTIFY "ULPIA 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 SECOND DAY OF APRIL, 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 "ULPIA INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2023.

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

Signature de la constitución de

2548334 8300 SR# 20241250404 Authentication: 203159358

Date: 04-02-24

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