Fax: 18132027867

To:

Fax: (850) 617-6383

Division of Corporations

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Florida Department of State

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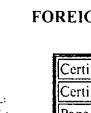
Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A.

Account Number: 076424003301 Phone : (813)223-7474 Fax Number : (813)227-0435

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FOREIGN PROFIT/NONPROFIT CORPORATION Barzo, Inc.

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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.

	orporation; must include "INCORPORATED," orp." "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATION,"	_
(If name unavail	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacting business in Florida	
Delaware 2.	3.	99-2689812	
(State or count	y under the law of which it is incorporated)	(FEI number, if applicable)	
4. 4/17/2024	5.		
(Date	of incorporation)	(Date of duration, if other than perpetual)	_
6			
	(Date first transacted business in E (SEE SECTIONS 607.1501 & 607.150		
_ 702 W. Dr. Mart	in Luther King Jr. Boulevard, Plant City, Florida	• • •	
/	(Principal office	· · · · · · · · · · · · · · · · · · ·	_
	(Current mailing	address, if different)	-
			4
	et address of Florida registered agent: (P.O. TK Registered Agent, Inc.	Box NOT acceptable)	
8. Name and <u>stre</u> Name: Office Address:		Box NOT acceptable)	ا المرابعة المرابعة
Name:	TK Registered Agent, Inc.	Box NOT acceptable) PR 25 Florida 33602	B

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.

Richard a. Bruner, Jr.
 (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.

	Michael Floyd		Joel Cook
□Chairman	Name: Michael Floyd	☐ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	
■Director	702 W. Dr. Martin Luther King Jr. Blvd.	Director	702 W. Dr. Martin Luther King Jr. Blvd
■ President	Plant City, PL 33563	□President	Plant City, FL 33563
□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
□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
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department.	artment of State Annual Ro	
12 P.d	Signature of Direct	ctor or Officer	· · · · · · · · · · · · · · · · · · ·

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

DELAWARE, DO HEREBY CERTIFY "BARZO, 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 APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BARZO, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF APRIL, A.D. 2024.

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

Authentication: 203330255

Date: 04-25-24