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From:

Account Name : RICHARUS & PARTNERS, P.A.

Account Number : 120110000001

Phone Fax Number

: (305)858-9908

: (305)285-0015

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FOREIGN PROFIT/NONPROFIT CORPORATION SYNERGY HOLDINGS FL CORP

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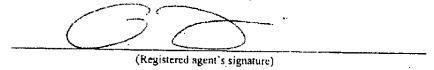
Help

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.

| SINEROI HI | OLDINGS FL CORP | | | | | |
|----------------------------------|---|---|------------|--|--|--|
| (Enter name of "Inc.," "Co.," "(| corporation; must include "INCORPORATED," " [orp," "Inc." "Co," or "Corp.") | COMPANY," "CORPORATION," | | | | |
| SYNERGY HO | DLDINGS ONE CORP | | | | | |
| (If name unavai | lable in Florida, enter alternate corporate name ado | pted for the purpose of transacting business in Flori | da) | | | |
| DELAWARE | | | | | | |
| (State or count | zy under the law of which it is incorporated) | (FEI number, if applicable) | | | | |
| 4/10/2024 | • | | | | | |
| (Date | of incorporation) | (Date of duration, if other than perpetual) | | | | |
| | | , , | | | | |
| | (Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, AYSHORE DRIVE SUITE 703, MIAMI FLORIDA (Principal office & AYSHORE DRIVE SUITE 703, MIAMI FLORIDA | F.S., to determine penalty liability) A 33133 (rest address) | | | | |
| | (Current mailing ac | dress, if different) | | | | |
| Name and street | et address of Florida registered agent: (P.O. B. WORLD CORPORATE SERVICES, INC | ox <u>NOT</u> acceptable) | OLLUNALION | | | |
| fice Address: | 2665 SOUTHBAYSHORE DRIVE STE 703 | | | | | |
| | MIAMI | Florida 33133 | PH 12: | | | |
| | | _ , 1 101104 | <u></u> | | | |

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.

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

From: TIMOTHY RICHARDS

| | A. DIRECTORS | ; | | |
|--|---|---|--|---|
| | □ Chairman | Name: RICHARDS, GWENDOLYN | □ Chairman | Name: |
| \· | □Vice Chairman | Address: 2665 S BAYSHORE DRIVE | □Vice Chairman | Address: |
| | Director | SUITE 703 | □Director □ | |
| | □President | MIAMI, FLORIDA 33132 | □President | |
| | □Vice President | | □ Vice President | |
| | ☐ Secretary | □ Freasurer | □ Secretary | ☐ Treasurer |
| | □Other | Other | □Other | |
| | □ Chainnan | Nume; | □ Chairman | Nume: |
| | □Vice Chairman | | ☐.Vice Chairman | Address: |
| | □ Director | | Director | |
| | □ President | | OPresident | |
| | □Vice President | | □Vice President | |
| | ☐Secretary | [] Treasurer | □Secretary | ☐Treasure: |
| ······································ | ☐Other | □Other | Other | |
| | | , , | | |
| | □Chairman | Name: | □ Chairman | Nume: |
| | □Vice Chairman | Address: | □Vice Chairman | Address: |
| | □Director | | □Director | |
| | □President | | □President | |
| | □Vi∞ President | | □Vice President | |
| | ☐ Secretary | El Treasurer | Secretary | □Treasurer |
| | □Other | □Other | □Other | |
| | Important Notice: U | ise an attachment to report more than six (6). The at added to the index when tiling your Florida Departs | tachment will be insued | the reporting managers and New York A |
| | | | | |
| | | | • | |
| | The officer or direct she is aware that fals s.817.155, F.S. | or signing this document (and who is listed in numb se information submitted in a document to the Depa | per 11 above) aftirms that irtment of State constitut | it the facts stated herein are true and that he or es a third degree felony as provided for in |
| | 13 | Gwendolyn Richar | 192 | |

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SYNERGY HOLDINGS CORP." 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-SECOND DAY OF APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SYNERGY HOLDINGS CORP." WAS INCORPORATED ON THE TENTH DAY OF APRIL, A.D. 2024.

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

3420913 8300 SR# 20241572241

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

Authentication: 203306914

Date: 04-22-24