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| (Requestor's Name) | | | |
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| (Cir | ty/State/Zip/Phon | e #) | |
| ☐ PICK-UP | MAIT | MAIL. | |
| (Bu | usiness Entity Nar | ne) | |
| (Document Number) | | | |
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JIVISION OF CORPORATIONS

COVER LETTER

| 10: | _ | tration Section on of Corporations | · | | • | |
|--|----------|--|------------------------|--|---|--|
| SUBJI | ECT: | Apex Water and Process Inc. | | | | |
| | | Name of corporation - must include suffix | | | | |
| Dear Si | ir or M | adam: | | | | |
| "Certifi | icate of | "Application by Foreign Co Existence," or "Certificate and foreign corporation to tr | of Good Stand | ling" and check are subn | | |
| Please | return a | all correspondence concerni | ng this matter | to the following: | | |
| МҮСО | RPOR/ | ATION | | | | |
| | | | Name of I | Person | | |
| | | | Firm/Comp | oany | | |
| 26025 8 | MUREA | AU RD STE 120 | | | | |
| | | | Addre | SS | | |
| CALAI | BASAS. | , CA 91302 | | | | |
| | | | City/State an | d Zip code | | |
| PROCE | ESSING | @MYCORPORATION.COM | | | | |
| | | E-mail address | : (to be used fo | or future annual report no | otification) | |
| For fur | ther inf | ormation concerning this m | atter, please ca | ill: | | |
| PROCE | ESSING | | 877 | de Daytime Telephone Number | | |
| | Name | e of Person | Area Code | Daytime Teleph | one Number | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | | | |
| Enclose Please n \$70. | nake ch | check for the following amorek payable to: FLORIDA DE mg Fee | EPARTMENT g Fee & □ | OF STATE \$78.75 Filing Fee & Certified Copy + | S87.50 Filing Fee. Certificate of Status & Certified Copy | |

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.

| 1 | Apex Water and F | Process Inc. | |
|--|---|--|----------------------|
| | orporation; must include "INCORPORATED," orp." "Inc," "Co," or "Corp.") | "COMPANY," "CORPORATION," | |
| (If name unavails | ible in Florida, enter alternate corporate name ac | lopted for the purpose of transacting busing | ness in Florida) |
| DELAWARE | 3 | | |
| (State or countr | y under the law of which it is incorporated) 5 | | |
| (Date | of incorporation) 5 | (Date of duration, if other than pe | erpetual) |
| . N/A | | | |
| | (Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 | | |
| 600 Quattro Drive | c, Chanhassen, MN 55317 | | |
| | (Principal office | street address) | |
| 600 Quattro Driv | e, Chanhassen, MN 55317 | | |
| | (Current mailing | address, if different) | |
| Name and street | t address of Florida registered agent: (P.O. | Box NOT acceptable) | 2 |
| Name: | Legaline Corporate Services Inc. | | VISION APR |
| Office Address: | 476 Riverside Ave. | | |
| Office Address. | Jacksonville | Florida | 强 2000 |
| | (City) | (Zip code) |);; 4 ' |
| | ent's acceptance: ed as registered agent and to accept service | of process for the above stated corp. | © 3 |
| lesignated in this urther agree to co | application, I hereby accept the appointme omply with the provisions of all statutes rel with and accept the obligations of my posi | ent as registered agent and agree to a lative to the proper and complete perf | ct in this capacity. |
| _ | Dunas | | |
| | (Registered agent's sign | nature) | |

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.

| A. DIRECTORS | | | | | | |
|----------------------------------|---|------------------|---------------------------|--|--|--|
| □Chairman | Name: Allan Bly | □Chairman | Al Richels Name: | | | |
| □Vice Chairman | Address: 12270 43rd St NE | □Vice Chairman | Address: 12270 43rd St NE | | | |
| Director | Saint Michael, MN 55376 | Director | Saint Michael, MN 55376 | | | |
| □President | | □President | | | | |
| □Vice President | | □Vice President | | | | |
| ☐ Secretary | □Treasurer | ■ Secretary | Treasurer | | | |
| □Other | Other | □Other | □Other | | | |
| □Chairman | Name: | □Chairman | Name: | | | |
| | 12270 43rd St NE Address: | □Vice Chairman | 12270 43rd St NE | | | |
| ■ Director | Saint Michael, MN 55376 | Director | Saint Michael, MN 55376 | | | |
| ■ President | | □President | | | | |
| □Vice President | | ■ Vice President | | | | |
| □ Secretary | □Treasurer | □Secretary | □Treasurer | | | |
| □Other | □Other | □Other | □Other | | | |
| Chairman | Name of | Chidenan | Name | | | |
| □ Chairman | Name: | | Name: | | | |
| | Address: | | Address. | | | |
| Director | | □Director | | | | |
| □President | | □President | | | | |
| □Vice President | | □Vice President | | | | |
| ☐ Secretary | □Treasurer | □Secretary | □Treasurer | | | |
| □Other | Other | □Other | □Other | | | |
| | Use an attachment to report more than six (6). The attachment to the index when filing your Florida Departmentals | | | | | |
| Signature of Director or Officer | | | | | | |
| | ctor signing this document (and who is listed in number also information submitted in a document to the Depar Secretary | | | | | |

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "APEX WATER AND PROCESS 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-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 "APEX WATER AND PROCESS INC." WAS INCORPORATED ON THE NINETEENTH DAY OF APRIL, A.D. 2023.

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

Authentication: 203303614

Date: 04-22-24

7415392 8300 SR# 20241563528