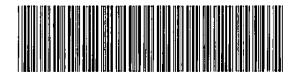
F24000003998

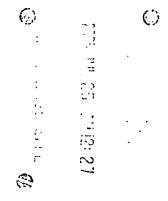
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	_
(Cit	y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





100433624241

07/24/24-+01030--018 *+70.00



COVER LETTER

TO:	Registration Section Division of Corpo				
SUB.	JECT:	MUD	WTR, IN	C.	
		Name of corp	poration - must	include suffix	
Dear :	Sir or Madam:				
"Certi	ificate of Existence,"	by Foreign Corporat or "Certificate of Go orporation to transact	od Standing" a	and check are subm	t Business in Florida," nitted to register the
Please	return all correspon	dence concerning this	matter to the	following:	
		Ruth	ıy J Willaı	rd	
		N	ame of Person		
		Kingdom	Business	Filings, Inc.	
		Fir	m/Company		
		7014 E	Golf Linl	ks Rd #152	
			Address		
		Tues	on, AZ 85	730	
	·	City	State and Zip	code	
	<u>-</u> .	hillary.die E-mail address: (to b	bold@mu	idwtr.com	
		m-maii address: (10 b	e used for futu	ге аппиат герогі по	ouncauon)
For fu	erther information con	ncerning this matter, p	olease call:		
Rı	uthy Willard	21 (520	790-5548	
	Name of Person	ar (ea Code	790-5548 Daytime Teleph	one Number
	STREET/COURI Registration Section Division of Corporation Centre of Tall 2415 N. Monroe S Tallahassee, FL 33	on rations ahassee treet, Suite 810		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations
Please		following amount: : FLORIDA DEPART] \$78.75 Filing Fee Certificate of State	& 🛮 \$78.7	ATE 5 Filing Fee & fied Copy	☐ \$87.50 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.

f name unavaila	able in Florida, enter alternate co	orporate name adop	sted for the purpose of transac	ting business in Florida)	-
	Delaware	3	83-32660 (FEI number, if	513	_
_					
	<u> </u>	5	Perpetua (Date of duration, if other	<u> </u>	_
(Date			(Date of duration, if other	er than perpetual)	
		uly 1, 2024	dan 16 o tonas medianisti s		_
			rida, if prior to registration) F.S., to determine penalty liab	oility)	
	2515 Main	Street Santa	Monica CA 9040:	5	_
		(Principal office st	reet address)		-
		Street Santa Current mailing ad	Monica CA 90405	5	
lame and <u>stree</u> Name:	t address of Florida registere Registered Agen	_	ox <u>NOT</u> acceptable)	©	
		ts Inc	ox <u>NOT</u> acceptable)	2374, JUJ.	
Name:	Registered Agen	ts Inc E 300	- -	2971 JUL 25	
Name:	Registered Agen 7901 4th St N ST	ts Inc E 300	ox NOT acceptable)	29% JUL 25 7772.	

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 Name: Shane Heath Name: Shane Heath □ Chairman □ Chairman Dvice Chairman Address: 800 Hampton Dr Address: 800 Hampton Dr. □ Vice Chairman Unit H Unit H □ Director **X**Director Venice CA 90291 Venice CA 90291 □ President X/President □Vice President □ Vice President □ Secretary ☐ Treasurer □Treasurer □ Secretary □Other _____ □ Other _____ □Other ______ □Other _____ □Chairman Name: □Chairman Name: □ Vice Chairman □Vice Chairman Address: ______ Address: □ Director □ Director []President □President ☐ Vice President ______ □Vice President □Treasurer □ Secretary □Treasurer □ Secretary □Other _____ ☐Other _____ □Chairman □ Chairman Name: Name: _____ Address: □ Vice Chairman Address: ☐ Vice Chairman □ Director □ Director. □President □President □Vice President □ Vice President □ Secretary ☐Treasurer □Treasurer □ Secretary □Other ____ □Other □Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Shane Heath 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. Shane Heath. President

Page 1



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

DELAWARE, DO HEREBY CERTIFY "MUD WTR, 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 TENTH DAY OF JULY, A.D. 2024.

TAYS OF THE PARTY OF THE PARTY

Authentication: 203899565

Date: 07-10-24