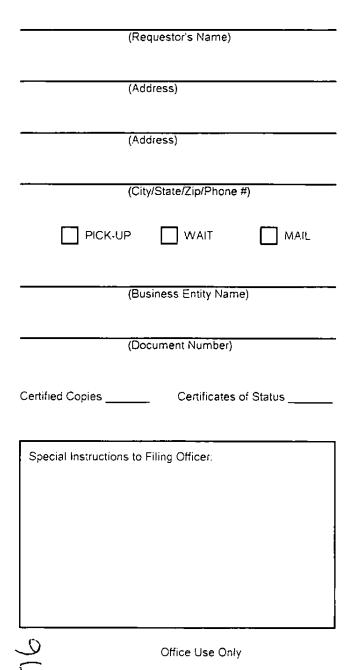
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COVER LETTER

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TO:		tration Section ion of Corporations			
SUBJ	ECT:	HUGHES INCORPORATED			
5020	201.	Name	of corporatio	n - must include suffix	•
Dear S	ir or M	adam:			
"Certif	icate o		of Good Sta	Authorization to Transact Business in Florida," nding" and check are submitted to register the ess in Florida.	
Please	return :	all correspondence concerni	ng this matte	r to the following:	
Jade H	aghes				
			Name of	Person	
HUGH	ES INC	ORPORATED			
			Firm/Cor	npany	
6417 Pe	enn Ave	S. Ste 8 IPMB 1306			
			Addı	ress	
Minnea	polis, N	IN 55423			
			City/State a	and Zip code	
hughesi	nc@ma	il.com			
		E-mail address	: (to be used	for future annual report notification)	
For fur	ther inf	ormation concerning this m	atter, please	call:	
Jade Hu	ighes		904 at (776-4935	
	Name	e of Person	Area Coc	le Daytime Telephone Number	
	Regist Divisi The C 2415	ET/COURIER ADDRESS ration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		MAH.ING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	nake che	check for the following amoved payable to: FLORIDA DE 1978.75 Filing Certificate of the control	EPARTMENT g Fee & [T OF STATE ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy Certificate of Status Certified Copy	&

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September 12, 2024

JADE HUGHES 1500 CALMING WATER DR UNIT 202 FLEMING ISLAND, FL 32003

SUBJECT: HUGHES INCORPORATED

Ref. Number: W24000128176

We have received your document for HUGHES INCORPORATED and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you sent in is for a Foreign LLC yet the Foreign name is a Corporation. If you are wanting to have an LLC you need to change the suffix. If this is suppose to be a Foreign LLC you will need to change the Incorporated to an LLC..

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Hughes Fl Inco			
(If name unavail	able in Florida, enter alternate corporate nan	me adopted for the purpose of transacting business in Florida	a)
Minneapolis		3. 92-1148285	
(State or count	y under the law of which it is incorporated)	(FEI number, if applicable)	
07/01/2003		5. Present (9/16/2024)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
		s in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)	_
6417 Penn Ave S	. Ste 8 IPMB 1306 Minneapolis, MN 55423		
		office street address)	_
1070 Montgome	ry RD# 2405 Altamonte Springs, Florida 32	714	
	(Current mai	iling address, if different)	_
Name and stree	et address of Florida registered agent: (F	P.O. Box NOT acceptable) SEP 16	<u>.u</u>
ivaine:	1070 Montgomery RD# 2405	6	-T-1
ffice Address:	Altamonte Springs, Florida	, Florida 32714	コ

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)

A. DIRECTORS Charles Hughes Jade Hughes Chairman Chairman □ Chairman 6417 Penn Ave S. Ste 8 IPMB 130 6417 Penn Ave S. Stc 8 IPMB 13 □Vice Chairman Address: □Vice Chairman Address: Minneapolis, MN 55423 Minneapolis, MN 55423 Director Director □ President President ☐ Vice President □Vice President ☐ Secretary ☐Treasurer ☐ Secretary ☐ Treasurer □Other _____ □Other _____ □Other _____ □Other ____ Jessa Beard Name: [] Chairman □ Chairman Name: 6417 Penn Ave S. Ste 8 IPMB ☐ Vice Chairman Address: □ Vice Chairman Address: Minneapolis, MN 55423 □ Director □ Director □President □ President ■ Vice President □ Vice President □ Secretary Treasurer ☐ Sccretary ☐ Treasurer Other _____ Other _____ □ Other _____ □Other _____ Name: □ Chairman Chairman Name: Tivice Chairman Address: ☐ Vice Chairman Address: □ Director Director □ President ☐ President □ Vice President ☐ Vice President ☐ Secretary □ Treasurer ☐ Secretary ☐ Treasurer □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 Amual-Report form. Signature of Director of 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.

(Typed or printed name and capacity of person signing application)

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: HUGHES INCORPORATED

Date Filed: 07/01/2003

File Number: 553197-2

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 09/01/2024

Ateve Pinn Steve Simon

Secretary of State State of Minnesota