F24000005183

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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COVER LETTER

TO:	Registration Section Division of Corpora				
SUBJE	ECT: Spuhler Medic	cal Inc.			
901301		Name of corporat	ion - must include suffix		
Dear Si	r or Madam:				
"Certifi	icate of Existence,"	by Foreign Corporation for "Certificate of Good Sorporation to transact bus	for Authorization to Transa- tanding" and check are sub- iness in Florida.	et Business in Florida," emitted to register the	
Please r	return all correspone	lence concerning this mat	tter to the following:		
Rodney	Wayne				
		Name	of Person		
Spuhler	Medical Inc.				
		Firm/C	ompany		
120 Alv	arado Ct.				
		Ad	ldress		
Saint A	ugustine, Florida 3209	22			
		•	e and Zip code		
rodmon		K9alphascience@gmail.co			
		E-mail address: (to be use	ed for future annual report	notification)	
For fur	ther information cor	cerning this matter, pleas	se call:		
Rodney Wayne at (435) 669-1905 Name of Person Area Code Daytime Telephone N					
	Name of Person	Area C	Ode Daytime Telep	hone 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			
Please n		following amount: : FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	NT OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

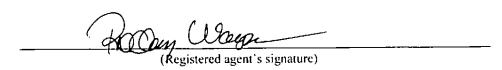
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

1	Spuhler Medical	Inc.						
		orporation: must include "INCORPORATE orp." "Inc." "Co." or "Corp.")	D.	"COMPANY," "CORPORATION,"				
*	K9 Alpha Science (1 will be filling for a DBA, with this name and it is available)							
	(If name unavaila	able in Florida, enter alternate corporate nan	ne :	dopted for the purpose of transacting busing	ness in Florida)			
2.	Utah		3.	84-4593443				
	(State or country under the law of which it is incorporated)			(FEI number, if applicable)				
4.	02/05/2020		5	perpetual				
٦.	(Date of incorporation)		٠.	(Date of duration, if other than po	rpetual)			
6.	n/a							
		(SEE SECTIONS 607.1501 & 607		Florida, if prior to registration) 02, F.S., to determine penalty liability)				
7.	120 Alvarado Ct.	Saint Augustine, Florida 32092						
		(Principal o	offi	ce street address)				
	same				<u> </u>			
		(Current ma	ilin	g address, if different)				
	Name:	120 Alvarado Ct.		Box <u>NOT</u> acceptable)	2024 SEP 23 F			
Oi	ffice Address:			22002	-P			
		Saint Augustine		, Florida	از. 2			
		(City)		(Zip code)	59			

9. Registered agent's acceptance:

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.

A DIRECTORS							
□Chairman	Name: Rodney Wayne	□ Chairman	Name:				
□Vice Chairman	Address:	□ Vice Chairman	Address: 120 Alvarado Ct.				
□Director	Saint Augustine, Florida 32092	□Director	Address: 120 Alvarado Ct. Saint Augustine, FL 32692				
President		□President					
□ Vice President		■ Vice President					
□Secretary	□Treasurer	Secretary	□Treasurer				
¹ Other	Other CEO	Other COO	Other				
□Chairman	Name:	□Chairman	Name:				
	Address:	□Vice Chairman	Address:				
☐ Director		Director					
□President		□President					
		□ Vice President					
			□Treasurer				
□ Secretary	□Treasurer	☐ Secretary					
Other	Other	Other	Other				
□Chairman	Name:	□Chairman	Name:				
	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□ Vice President		□Vice President					
	□Treasurer	□ Secretary	☐ Treasurer				
☐ Secretary ☐ Other		☐Other					
Important Notice: individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Depar	attachment will be image tment of State Annual Ro	d for reporting purposes only. Non-indexed port form.				
12. 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.							
Rodney Wayne CEO/President/owner							



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

09/16/2024 11608750-014209162024-2448690

CERTIFICATE OF EXISTENCE

Registration Number:

11608750-0142

Business Name:

SPUHLER MEDICAL INC.

Registered Date:

January 09, 2020

Entity Type:

Corporation - Domestic - Profit

Status:

Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Adam Watson

Director

Division of Corporations and Commercial Code

Adam Wakon