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COVER LETTER

	Registration Section Division of Corporations							
SUBJE	SCT. S	termer Enter	prises, Inc.					
ЭОВ			Name c	of corporati	on - mu	st include suffix		
Dear Sir	r or Mad	lam:						
"Certifi	cate of E	Existence," o		of Good St	anding"	and check are subr	t Business in Florida," nitted to register the	
Please r	eturn all	l corresponde	nce concerni	ng this mat	ter to the	e following:		
Sandra	Westma	an						
		• •		Name	of Perso	n		
Diversifi	ied Tax	Services, Inc						
_	-			Firm/C	ompany			
P.O. Bo	x 6509							
				Ad	dress			
Albuque	erque, N	M 87197						
				City/Stat	e and Zi	p code		
Sandra.	.Westma	an@dcinm.co						
		Е	-mail address	: (to be use	ed for fut	ure annual report n	otification)	
For furt	ther info	rmation conc	erning this m	atter, pleas	e call:			
Sandra Westman 505				, 93	933-7347 le Daytime Telephone Number			
·,	Name	of Person		Area C	ode	Daytime Teleph	none 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	ed is a cl nake chec .00 Filin	ck payable to:	ollowing amo FLORIDA DI \$78.75 Filin Certificate o	EPARTME g Foe &	□ \$78	STATE 1.75 Filing Fee & rtified 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.

l	Stermer Enterprises, Inc.					
(Enter name of c	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"				
(If name unavail	lable in Florida, enter alternate corporate name ac	dopted for the purpose of transacting busines	ss in Florida)			
New Mexico	2					
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)				
(Date	S 5	5. (Date of duration, if other than perpetual)				
6.						
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150					
7. 8801 Jefferson	St NE Building C, Albuquerque, NM 87113					
	(Principal office	: street address)				
7762 Arbor Cre	st Way Palm Beach Gardens, Florida 33412					
	(Current mailing	address, if different)	= 2024 OCT 7			
			00:			
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)				
Name:	Elisabeth Stermer	:	7 P			
Office Address:	7762 Arbor Crest Way		PN 2: 44			
	Palm Beach Gardens	, r iorida	ATE.			
	(City)	(Zip code)				
Degictored ag	ent's acceptance:					
	the sacceptance. ied as registered agent and to accept service	e of process for the above stated corpor	ation at the place			
designated in this	application, I hereby accept the appointme	ent as registered agent and agree to act	in this capacity.			
• • • • • • • • • • • • • • • • • • • •	comply with the provisions of all statutes religious of my position of my positions of my positions of my positions.		rmance of my dut			
	EStermer					
_	(Registered agent's sign	nature)				

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.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

A. DIRECTORS

13. Elisabeth Stermer

□Chai⊓nan	Name:	□Chairman	Name:
□Vice Chairman	7762 Arbor Crest Way, Palm Beach Address: Gardens FL 33412	□Vice Chairman	Address:
■ Director	Clifford Stermer	Director	
■ President	Clifford Stermer	□President	
■ Vice President	Elisabeth Stermer	□Vice President	
■ Secretary	■ Treasurer	☐Secretary	□Treasurer
Elisabetl □Other	Stermer Elisabeth Stermer	□Other	Other
_	Name: CIHOVOS EY MES 7762 arbor Crest Way, Address: Palm Beach F/ 33412		Name:
Director		□Director	
President		□President	
□Vice President		□Vice President	
□ Secretary	□Treasurer	☐ Secretary	Treasurer
Other	Other	□Other	□Other
□ Chairman	Name: Elisabeth Stermer 7762 arbor Crest way.	□Chairman	
□Vice Chairman	Address: Palm Beach Gordens F(33412	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
Vice President		□Vice President	
Secretary	Treasurer	□Secretary	□Treasurer
Other	Other	□Other	Other
individuals may b	Use an attachment to report more than six (6). The attack added to the index when filing your Florida Departmen	t of State Annual Re	eport form.
12	Signature of Director or	Officer	
The officer or dire she is aware that f s.817.155, F.S.	ector signing this document (and who is listed in number alse information submitted in a document to the Departm	11 above) affirms th	nat the facts stated herein are true and that he or



Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

Stermer Enterprises, Inc. 5646090

the above named entity, a Corporation incorporated under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Profit Corporation, under the

Business Corporation Act

53-11-1 to 53-18-12 NMSA 1978

having filed its Articles of Incorporation on March 26, 2018, and Certificate of Incorporation issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: October 8, 2024

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.

Maggie Toulouse Oliver
Secretary of State

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Certificate Validation #: 0100755

A certificate issued electronically from the New Mexico Secretary of State's office is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Validation option on the Business Filing System at https://portal.sos.state.nm.us/bfs/online and following the instructions displayed under Certificate Validation.