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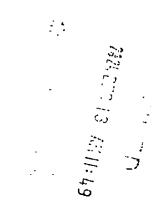
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COVER LETTER

TO:		tration Section ion of Corporations			
SUBJ	FCT.	ZROX EV. INC.			
., 0 1,,,	1.01.	Name (of corporation	- must include suffix	
Dear S	ir or M	adam:			
"Certif	īcate o	"Application by Foreign Co f Existence," or "Certificate eed foreign corporation to to	of Good Stand	ling" and check are sub	
Please	return	all correspondence concerni	ng this matter	to the following:	
JAMES	S PALN	1ER			
			Name of P	Person	
ZROX	EV INC				
		-	Firm/Comp	pany	
9212 F	RY RO	AD, STE 105-351			
			Addres	SS	·
CYPRI	ESS. TN	77433			
			City/State an	d Zip code	<u>. </u>
JIMPA	LMER(@ZROX.COM			
		E-mail address	: (to be used fo	or future annual report is	otification)
For fur	ther int	formation concerning this m	atter, please ca	ill:	
JAMES	S PALN	1ER	at (395-1586	
	Name	e of Person	Area Code	Daytime Telepl	hone Number
	Regis Divisi The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Tentre of Tallahassee N. Monroe Street, Suite 810 massee, Fl. 32303		MAILING A Registration S Division of Co P.O. Box 6322 Tallahassee, F	ection orporations 7
	nake ch	check for the following amoved payable to: FLORIDA DI ng Fee	EPARTMENT (g Fee &	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.

(If name unavaila	able in Florida, enter alternate corporate name add	opted for the purpose of transact	ting business	in Florida)	-
TEXAS	3	D-1079929			_
(State or countr 02/07/2024	y under the law of which it is incorporated) 5.	(FEI number, if			
(Date	of incorporation)	(Date of duration, if other than perpetual)			-
9212 FRY ROAF	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502), STE 105-351		ility)		
CYPRESS, TX 7	(Principal office	street address)			-
	(Current mailing a	iddress, if different)	7.5		
Name and stree	t address of Florida registered agent: (P.O. I	Box NOT accentable)	· . *	75.3 75.3	
Name:	GREGORY FADUL			4 D 13	
ffice Address:	190 SE 5TH AVENUE, STE 310			(.) 	•
	DELRAY BEACH, FL	— 33483 Florida 33483			•
	(City)	Florida 33483 (Zip code)	; ; • •	-	المد
aving been nam	nt's acceptance: ed as registered agent and to accept service application, I hereby accept the appointmer omply with the provisions of all statutes rela with and accept the obligations o <u>f my</u> posite	nt as registered agent and ag tive to the proper and comp	ree to act in	this capac	city

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: JAMES D PALMER	□Chairman	Name: GREGORY W FADUL					
□Vice Chairman	Address: 9526 W PEDERNALES RIVER I	□Vice Chairman	Address: 190 SE 5TH AVE, STE 310					
■Director	CYPRESS, TX 77433	Director	DELRAY BEACH, FL. 33483					
■President	USA	□President	USA					
□Vice President		□Vice President						
□ Secretary	□Treasurer	■ Secretary	□Treasurer					
□Other	□Other	□Other	□Other					
□Chairman	Name:	□Chairman	CAREN LIU Name:					
	3621 HIGHWAY 7 EAST	□Vice Chairman □Director □President	3621 HIGHWAY 7 FAST					
■Director	UNIT 202		UNIT 202					
□President	MARKHAM, ON L3R0GA		MARKHAM, ON L3R0GA					
□Vice President	CANADA	□Vice President	CANADA					
□ Secretary	□Treasurer	□ Secretary	□Treasurer					
⊡Other	□Other	□Other						
□Chairman	Name:	□Chairman	Name:					
	Address:							
	Audress.		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 Sanc Annual Report form.								
12								
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.

13. JAMES D PALMER , DIRECTOR

Corporations Section P.O.Box 13697 Austin. Texas 78711-3697



Jane Nelson Secretary of State

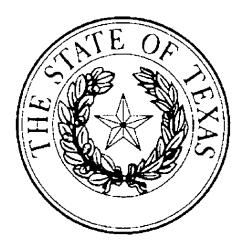
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for ZROX EV INC. (file number 805411544), a Domestic For-Profit Corporation, was filed in this office on February 07, 2024.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 02, 2024.



gave Helson

Jane Nelson Secretary of State

| Come visit us on the internet at https://www.sos.texas.gov/
| Phone: (512) 463-5555 | Fax: (512) 463-5709 | Dial: 7-1-1 for Relay Services |
| Prepared by: SOS-WEB | TID: 10264 | Document: 1429261570003