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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)389-0502

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION NUTRALOID LABS INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
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115

K. SALY

JAN 28 2025

Page: 3 of 6

COVER LETTER

	egistration Section ivision of Corporations					
SUBJEC	NUTRALOID LABS INC	· ·				
SODJEC		ne of corporation -	nust include suffix			
Dear Sir o	or Madam:					
"Certifica	sed "Application by Foreign te of Existence," or "Certific crenced foreign corporation t	ate of Good Standi	ng" and check are sub			
Please ret	urn all correspondence conce	erning this matter to	the following:			
Erik Treut	lein					
		Name of Pe	son			
Legalzooi	n.com, Inc.					
		Firm/Compa	ny			
9900 Spec	trum Dr					
		Address				
Austin, T	K 78717					
		City/State and	Zip code			
brouck126	··					
	E-mail addr	ess: (to be used for	future annual report n	notification)		
For furthe	r information concerning this	s matter, please call	:			
Frik Treutlein S00			773-0888			
?	Name of Person	Area Code	Daytime Telep	hone Number		
R D T 2-	TREET/COURIER ADDR egistration Section ivision of Corporations he Centre of Tallahassee 415 N. Monroe Street, Suite 8 allahassee, FL 32303		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection prporations 7		
Please mak	is a check for the following a te check payable to: FLORIDA Filing Fee	. DEPARTMENT O illing Fee & ■ \$	F STATE 78.75 Filing Fee & Certified 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.

NUTRALOID I	LABS INC.			
(Enter name of	corporation; must include "INCORPORATED," 'Corp." "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION,"		
(If name unavai	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting business	ss in Florida)	
New York	3. 2	71481782		
(State or count 12/04/2009	ry under the law of which it is incorporated) 5.	(FEI number, if applicable)		
(Dat	e of incorporation)	(Date of duration, if other than perpetual)		
7. ²¹⁸⁰ SW Oasis ⁷	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 Terrace, Stuart FL 34997 (Principal office	P. F.S., to determine penalty liability)		
	(Current mailing	address, if different)	1935 JUH 27	
8. Name and stre	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable}		
Name:	Bart Panessa	<u> </u>	7 PM 5: 23	
Office Address:	1095 Military Trail 392	_	23	
	Jupiter	. Florida <u>33468</u>		
	(City)	(Zip code)		

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.

Bart Panessa

/s/Bart Panessa

(Registered agent's signature)

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.

To: . . . Page: 5 of 6 2025-01-27 09:02:20 PST LegalZoom.com, Inc. From: Metanie Iberra

A. DIRECTORS					
□Chairman	Name: Bart Panessa	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
■ Director	Stuart FL 34997	□ Director			
President		□President			
□Vice President		□Vice President			
■ Secretary	■ Treasurer	□Secretary	į	Treasurer	
Other	□Other	□Other	<u>.</u> !	□Other	
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:	3 7	
Director		□Director	<u></u>		
□President		□President		U)	
□Vice President		□Vice President		<u>ن</u> ب	
□ Secretary	☐ Treasurer	□Secretary	1	☐Treasurer	
Other	Other	□Other	i	DOther	
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director		Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□ Secretary	i	□Treasurer	
□ Other	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. 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.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I. WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: NUTRALOID LABS INC.

DOS ID Number: 3885770

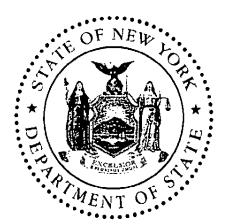
Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 12/04/2009

Statement Status: CURRENT Statement Due Date: 12/31/2025



No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on January 27, 2025 at 11:52 A.M.

WALTER T. MOSLEY Secretary of State

Brandon C Hydro

BRENDAN C. HUGHES
Executive Deputy Secretary of State

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