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| Special Instructions to Filing Officer: | |
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Office Use Only



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CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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| XX | РНОТОСОРУ | | |
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| XX | FILING | FOREIGN INC | |
| 1. | ASHLEY MAY INC. | | |
| | (CORPORATE NAME AND DOC | UMENT #) | |
| 2. | (CORPORATE NAME AND DOC | UMENT #) | |
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| SPECIAI | L INSTRUCTIONS: | | |
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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.

| DELAWARE | mote in Florida, emer atternate corporate name at | dopted for the purpose of transacting b | usiness in Florida) |
|---|---|--|------------------------|
| | 3 | (FEI number, if applic | |
| (State or count 08/04/2020 | ry under the law of which it is incorporated) 5. | | |
| (Date of incorporation) (Date of duration, if other | | (Date of duration, if other than | n perpetual) |
| | | | |
| | (Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 | | |
| | 5095 Fairways Circle, Unit | #i204, Vero Beach, FL 32967 | |
| - | (Principa | l office address) | |
| | | | 200 |
| | (Current mailing | address, if different) | . H |
| Name and stre | et address of Florida registered agent: (P.O. | Day MOT againtable) | HAY 20 |
| ivalle and site | Ashley Lynch | Box NOT acceptante) | 0 |
| Name: | | | PH 10: |
| | 5095 Fairways Circle, Unit #i204 | | 0: 0 |
| fice Address: | | 32967 |)2 |
| fice Address: | Vero Beach | Florida | |
| fice Address: | | , Florida (Zip code) | |
| | (City) | | |
| Registered ag | (City) | (Zip code) | orporation at the pla |
| Registered ag wing been nan signated in this | (City) | (Zip code) e of process for the above stated coent as registered agent and agree i | to act in this capacit |

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Ashley Lynch Chairman: 5095 Fairways Circle, Unit #i204 Address: _ Vero Beach, FL 32967 Vice Chairman: ___ Director: Address: Director: ___ Address: _ **B. OFFICERS** Ashley Lynch President: _ 5095 Fairways Circle, Unit #i204 Address: Vero Beach, FL 32967 Vice President: Address: ____ Secretary: ___ Address: ___ Treasurer: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

13. Ashley Lynch - President

Page 1

Delaware The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASHLEY MAY INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF MAY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASHLEY MAY INC." WAS INCORPORATED ON THE FOURTH DAY OF AUGUST, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Charuni Patibonda-Sanchez, Secretary of State Authentication: 203727901

C. G. Sancher

Date: 05-19-25