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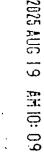
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(business Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

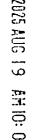


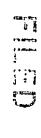


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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are optional. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

COVER LETTER

	Registration Secti Division of Corpo				
SUBJE	cct: Ubern	otary, Inc.			
COBGE				nust include suffix	
Dear Si	r or Madam:				
"Certifi		or "Certificate of	f Good Standir	thorization to Transacting" and check are submin Florida.	
Please r	eturn all correspoi	idence concerning	this matter to	the following:	
Brar	ndi Morris				
			Name of Per	rson	
Hark	oor Compl	iance			
	•		Firm/Compa	ny	
1830	O Colonial	Village Ln	1		
			Address		
Land	caster, PA	17601			
			City/State and	Zip code	
corp	orate@ha	rborcompl	liance.co	om	
-		E-mail address: (to be used for	future annual report no	otification)
For furt	her information co	oncerning this mat	ter, please call	:	
B. M	1orris	at	717	490-7935 Daytime Teleph	
	Name of Person		Area Code	Daytime Teleph	one Number
	STREET/COUR Registration Section Division of Corporate Centre of Tal 2415 N. Monroe Stallahassee, FL Control of Tallahassee, FL C	on orations lahassee Street, Suite 810		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations
Please in	ed is a check for th nake check payable t 00 Filing Fec		ARTMENT O	F STATE 78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

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.

California (State or country under the law of which it is incorporated) 11/24/2014 (Date of incorporation) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 210 S Ellsworth Ave Unit 406 San Mateo, CA 94401 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City) Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation the state of the above stated corporation to the state of the	Californ	If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
(State or country under the law of which it is incorporated) 11/24/2014 (Date of incorporation) (Date of duration, if other than perpetual) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 210 S Ellsworth Ave Unit 406 San Mateo, CA 94401 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City) Registered agent's acceptance:			'-2835479					
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 210 S Ellsworth Ave Unit 406 San Mateo, CA 94401 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City) Registered agent's acceptance:		ry under the law of which it is incorporated)	(FEI number, if applicable)					
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 210 S Ellsworth Ave Unit 406 San Mateo, CA 94401 (Principal office street address) (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City) Registered agent's acceptance:	•		(Date of duration, if other	than perpetual)				
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Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City) Registered agent's acceptance:		(Current mailing ad	dress, if different)					
Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City) Registered agent's acceptance:								
7901 4th St N STE 300 St. Petersburg (City) Registered agent's acceptance:								
(City) (Zip code)	Name and street	et address of Florida registered agent: (P.O. Bo	ox <u>NOT</u> acceptable)					
(City) (Zip code)			ox <u>NOT</u> acceptable)	202 110				
(City) (Zip code)	Name:	Registered Agents Inc	ox <u>NOT</u> acceptable)	2025 AUG 19 AM II				
		Registered Agents Inc 7901 4th St N STE 300	_	2025 AUG 19				
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	Name: ffice Address:	Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City)	_					
	Name: fice Address: Registered agaving been nansignated in this	Registered Agents Inc 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance:	, Florida 33702 (Zip code) of process for the above states t as registered agent and agre	Corporation and he see to act in this capa				

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: Eli Angote	□Chairman	Name:	
□Vice Chairman	Address: 210 S Ellsworth Ave Unit 406	□ Vice Chairman	Address:	
□Director	San Mateo, CA 94401	□Director		
President		□President		
□Vice President		□Vice President		<u> </u>
□Secretary	□Treasurer	Secretary	□Treasurer	
□ Other	Other	□Other	□Other	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	Treasurer	☐ Secretary	□Treasurer	
Other	Other	Other	□Other	
□Chairman	Name:	□ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary	□Treasurer	
Other	Other	Other	□Other	
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department of the Angota	it of State Annual Re	eport form.	
12/	Signature of Director or	Officer		
	ctor signing this document (and who is listed in number alse information submitted in a document to the Departm			

Eli Angote, President



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: UBERNOTARY, INC.

Entity No.: 3729863 **Registration Date:** 11/24/2014

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 13, 2025.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 357168733

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.