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COVER LETTER

TO:

Registration Section

	ShipWizard USA, LLC					
SUBJECT:	Name of Limited Liability Company					
	d "Application by Foreign Limited Liability (Company for Authorization to Transact Business in Florida," Certificate or referenced foreign limited liability company to transact business in Florida.				
Please return	all correspondence concerning this matter to	o the following:				
	Carrie Hambleton					
		Name of Person				
	ShipWizard USA, LLC					
	Firm/Company					
	3580 Prospect Road					
	Address					
	Fort Lauderdale, FL 33309					
	C	City/State and Zip Code				
	carrieh@chapmanhanlon.com					
	E-mail address: (to be	e used for future annual report notification)				
For further in	nformation concerning this matter, please cal	II:				
Car	rrie Hambleton	704 9976525 at ()				
	Name of Contact Person	Area Code Daytime Telephone Number				
	iling Address: gistration Section	Street Address: Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Tal	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Plea	closed is a check for the following amount: ase make check payable to: FLORIDA DEP \$125.00 Filing Fee \$130.00 Filing Fee Certificate of	e & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee, Certificate				

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

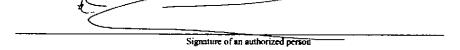
orth Carolina (Jurisdiction under the law of w			
(Jurisdiction under the law of v		85-1158741 3.	
	which foreign limited liability company is organized)	(FEI number, if applicable)	
7/27/2020			
	(Date first transacted business in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	istration.) penalty liability)	
3580 Prospect Road		510 Meadowmont Village Circle, Ste. 312	
t Address of Principal Office)		6. (Mailing Address)	
Fort Lauderdale, FL 33	3309	Chapel Hill, NC 27517	
lame and <u>street addre</u>	ss of Florida registered agent: (P.O. Box)	NOT acceptable)	1021 JUL 2
ame and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Box 1) Thomas F. Hanlon, III	NOT acceptable)	1021 JUL 23 P
		NOT acceptable)	1021 JUL 23 PH 2:51
Name:	Thomas F. Hanlon, III	NOT acceptable) 33309 Florida	1021 JUL 23 PH 2:51

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Julie Appel	□Manager	Name:
Member	Address:	■Member	Address: 510 Meadowmont Village Cir
□Authorized	Ft. Lauderdale, FL 33309	□Authorized	Ste. 312
Person		Person	Chapel Hill, NC 27517
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
■Member	Address: 510 Meadowmont Village Cir	□Member	Address:
□Authorized	Stc. 312	□Authorized	
Person	Chapel Hill, NC 27517	Person	
□Other	Other	□Other	Other
□Manager	Name:	□Малаger	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	Other	Other

<u>Important Notice</u>: 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.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.





NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

SHIPWIZARD USA, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 26th day of May, 2020

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of July, 2021.

Elaine I. Marshall

Secretary of State