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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	÷ #)
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S. HAWKES

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: Socrates Invest LLC		
50130		ation - must include suffix	
Dear S	iir or Madam:		
"Certif	iclosed "Application by Foreign Corporation ficate of Existence," or "Certificate of Good is referenced foreign corporation to transact bu	Standing" and check are submit	
Please	return all correspondence concerning this ma	atter to the following:	
Ryan I	Oodds		
	Name	e of Person	
Socrate	es Invest LLC		
	Firm/0	Company	
501 N.	Orlando Ave. STE 313 #461		
	Λ	ddress	-
Winter	Park, FL 32789		
	City/Sta	ite and Zip code	
Nick@	socratesinvest.com; mario@socratesinvest.com;	ryan@socratesinvest.com; justin@	socratesinvest.com
	E-mail address: (to be us	sed for future annual report noti	fication)
For fu	rther information concerning this matter, plea	ase call:	
Justin (Corrado / Ryaw Dooos at (855 1355	
	Name of Person Area	Code Daytime Telephor	ne Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADE Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations
Please	sed is a check for the following amount: make check payable to: FLORIDA DEPARTM 0.00 Filing Fee \$\Bar{\text{Certificate of Status}}\$	_	■ \$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.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATIO	, ",		
Socrates LLC					
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacti	ing business in Florida)		
Delaware	3	86-3321574			
(State or country under the law of which it is incorporated)		(FEI number, if applicable)			
		Perpetual			
(Date	of incorporation) 5.	(Date of duration, if other	r than perpetual)		
	eted business in Florida yet				
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liabi	lity)		
501 N. Orlando A	ve. STE 313 #461 Winter Park, FL 32789				
·	(Principal off	ice street address)			
Same as above					
	(Current maili	ng address, if different)			
. Name and <u>stree</u> Name:	et address of Florida registered agent: (P. Ryan Dodds	O. Box <u>NOT</u> acceptable)	F. 3 F. 3 F. 3 F. 3 F. 3 F. 3 F. 3 F. 3		
ffice Address:	501 N. Orlando Ave. STE 313 #461		, -1 ;		
mee radiess.	Winter Park	, Florida	PH 1:40		
	(City)	(Zip code)	四百 美		
laving been nam esignated in this urther agree to c	ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes of with and accept the obligations of my pe	ment as registered agent and agr relative to the proper and comple	ed corporation at the plac ree to act in this capacity.		
	- 19-18-				
	(Registered agent's s	(enutenois			

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS						
□ Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chairman	Address:			
Director	STE 313 #461	Director	STE 313 #461			
□President	Winter Park, FL 32789	□President	Winter Park, FL 32789			
☐Vice President		☐Vice President				
☐ Secretary	Treasurer	☐ Secretary	☐Treasurer			
□Other	□Other	□Other	Other			
□Chairman	Ryan Dodds Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
Director	STE 313 #461	Director	STE 313 #461			
□President	Winter Park, FL 32789	□President	Winter Park, FL 32789			
□Vice President		□Vice President				
□Secretary	Treasurer	□ Secretary	□Treasurer			
□Other	Other	□Other	Other			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman				
☐Director		Director				
□President		□President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	Other	□Other				
individuals may be	Use an attachment to report more than six (6). The attachment to report more than six (6). The attachment added to the index when filing your Florida Department	ent of State Annual Re	d for reporting purposes only. Non-indexed port form.			
12.	Clients Co	andler				
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 of 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. Justin Corrado



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SOCRATES INVEST LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE FOURTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOCRATES INVEST LLC" WAS FORMED ON THE FOURTEENTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



Authentication: 204319412

Date: 10-04-21