

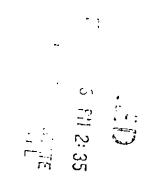
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S. HAWKES

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	SAW AG	ÞÝER LETTER		
TO:	Registration Section Division of Corporations	*** *** *** *** *** *** *** *** *** **		ζ.
	ECT. eHubCo LLC			
SOBJ	16C1	f Limited Liability Co.	mpany	
The er Existe	enclosed "Application by Foreign Limited Liability Con ence, and check are submitted to register the above refe	npany for Authorizatic crenced foreign limited	on to Transact Business in Florida," C I liability company to transact busines	ertificate o s in Floric
Please	e return all correspondence concerning this matter to th	e following:		
	Caroline Quigley			
		Name of Person		
	Inc. Plan (USA)			
		Firm/Company		
	20C Trolley Square	ż		
	200 1101109 044411	Address		
	Wilmington, DE 19	80 6		
		/State and Zip Code		•
	cquigley@incplan.n	·		
	E-mail address: (to be us		eport notification)	
	Such as information concerning this matter, plansa calls			
For fu	urther information concerning this matter, please call:			
For fi		.302	428-1200	
For fi	Caroline Quigley Name of Contact Person	at (302)	428-1200 Daytime Telephone Number	
For fi	Caroline Quigley	Area Code	<u> </u>	
For fi	Caroline Quigley Name of Contact Person MAILING ADDRESS: Division of Corporations	Area Code	Daytime Telephone Number STREET ADDRESS: Division of Corporations	
For fi	Caroline Quigley Name of Contact Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	Area Code	Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building	
For fu	Caroline Quigley Name of Contact Person MAILING ADDRESS: Division of Corporations Registration Section	Area Code	Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section	
For û	Caroline Quigley Name of Contact Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Area Code	Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	
For û	Caroline Quigley Name of Contact Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPA	Area Code Area Code	Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
For û	Caroline Quigley Name of Contact Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Enclosed is a check for the following amount:	Area Code Area Code S RTMENT OF STAT S S 155.00 F	Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 E. Filing Fee & S160.00 Filing Fe	

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: լ eHubCo LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "L.L.C.") (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 19C Trolley Square 6. 19C Trolley Square (Mailing Address) Street Address of Principal Office) Wilmingtfon, DE 19806 Wilmingtfon, DE 19806 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Northwest Registered Agent LLC Name: 7901 4th St N STE 300 Office Address: St. Petersburg

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.



☐Manager ☑Member ☐Authorized	Name: 9422-3930 Quebec Inc		
	10501 Clark Graham S 200	Manager Manager	Name: Caroline Quigley
Authorized	Address: 19501 Clark Graham S 200	Member	Address: 20C Trolley Square
	Baie D'urfe, Quebec, H9T 3T1	Authorized	Wilmington, DE 19806
Person	Canada	Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	Address:	☐ Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	Other
Manager	Name:	☐ Manager	Name:
Member	Address:	☐ Member	Address:
Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other
indexed individuals O Attached is a cer	Use an attachment to report more than six (6). The smay be added to the index when filing your Floortificate of existence, no more than 90 days old, on the law of which it is organized. (If the certificate lust be submitted)	orida Department of State duly authenticated by the	e Annual Report form. c official having custody of records in the
10. This document submitted in a docu	is executed in accordance with section 605.0203 ument to the Department of State constitutes a thi	(1) (b), Florida Statute rd degree felony as prov	s. I am aware that any false information rided for in s.817.155, F.S.
	Carolin Origles	of an authorized person	<u> </u>
	Caroline Quigley		



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

DELAWARE, DO HEREBY CERTIFY "EHUBCO 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 THIRTIETH DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EHUBCO LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2021.

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



Authentication: 203052025

Date: 03-30-22

SR# 20221237686