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(1	Requestor's Name)			
(,	Address)			
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PICK-UP	WAIT MAIL			
	Business Entity Name)			
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S. FRANKLIN
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## COVER LETTER

1. Sec. 1. 1.

TO:

TO:	Registration Section Division of Corporations				
CI ID II		onal Underwater Explorations, LLC			
SUBJECT:Name of Limited Liability Company					
The en Exister	iclosed "Application by Foreign Limited Liability nce, and check are submitted to register the above	Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.	" Certificate of iness in Florida.		
Please	return all correspondence concerning this matter	to the following:			
		Antonio Moscatelli			
	Name of Person				
International Underwater Explorations, LLC					
	Firm/Company				
	590 Lipoa Pkwy Suite C2				
	Address				
Kihei, HI 96753					
	City/State and Zip Code				
	amoscatelli@iuetech.com				
	E-mail address: (to b	be used for future annual report notification)	- 25		
For fu	rther information concerning this matter, please co	all:	PH 1		
	Antonio Moscatelli	808 276-0319 at ( )	14: 18		
	Name of Contact Person	Area Code Daytime Telephone Number	-		
	Mailing Address:	Street Address:			
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration Section			
		Division of Corporations			
		The Centre of Tallahassee			
		2415 N. Monroe Street, Suite 810			
		Tallahassee, FL 32303			
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE  \$125.00 Filing Fee \$130.00 Filing F  Certificate	ee & 🗆 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee			

# 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: International Underwater Explorations, 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 "LLC,") (FEI number, if applicable) (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.) 75 SW 12th Ave 590 Lipoa Pkwy (Street Address of Principal Office) #507 Suite C2 Kihei, HI 96753 Deerfield Beach, FL 33442 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Antonio Moscatelli Name: 75 SW 12th Ave #507 Office Address: Deerfield Beach (City) 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.

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: Antonio Moscatelli	□Manager	Name:			
□Member	Address: 75 SW 12th St. #507	□Member	Address:			
□Authorized	Deerfield Beach, FL 33442	□Authorized				
Person		Person				
Other	Other	Other	Other			
□Manager	Name:	□Manager	Name:			
□Member	Address:	□Member	Address:			
□Authorized		□Authorized				
Person		Person	2022			
□Other	Other	Other				
□ Manager □ Member	Name:Address:	□Member	Name:Address:			
□Authorized		Authorized				
Person		Person				
Other	Other	Other	Other			
9. Attached is a cer jurisdiction under the translator mu 10. This document	is executed in accordance with section 605, ment to the Department of State constitutes	or Florida Department of State old, duly authenticated by the ficate is in a foreign language 0203 (1) (b), Florida Statutes	e Annual Report form.  cofficial having custody of records in the  catranslation of the certificate under oath  call am aware that any false information			
Antonio Moscatelli						

Typed or printed name of signee



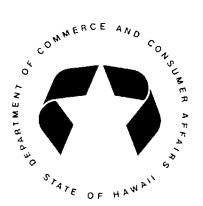
# Department of Commerce and Consumer Affairs

## CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

INTERNATIONAL UNDERWATER EXPLORATIONS, LLC

was organized under the laws of the State of Hawaii on 06/05/2007; that it is an existing limited liability company in good standing and is duly authorized to transact business.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: July 06, 2022

Catanil. Quali Cali

Director of Commerce and Consumer Affairs