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K. SALY JUN 13 224

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: ENAGIC SERVICE USA, IN	C.		
	of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to tr	of Good Stan	ding" and check are submitted	
Please return all correspondence concerni	ng this matter	to the following:	
ICHIKO UDAGAWA			
	Name of	Person	
TWO MILES ACCOUNTANCY CORPORA	TION		
	Firm/Con	pany	
400 N. TUSTIN AVE SUITE 240			
	Addro	288	
SANTA ANA, CA 92705			
	City/State a	nd Zip code	
udagawa@twomiles.net			
E-mail address	: (to be used f	for future annual report notifica	tion)
For further information concerning this m	atter, please c	call:	
ICHIKO UDAGAWA	at (437-5823	
Name of Person	Area Cod	e Daytime Telephone N	umber
STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	ions
Enclosed is a check for the following amo Please make check payable to: FLORIDA DE \$70.00 Filing Fee S78.75 Filing Certificate of	EPARTMENT g Fee & - C	☐ \$78.75 Filing Fee & ☐ \$ Certified Copy	887.50 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.

		adopted for the purpose of transacting business in Florida)	
CALIFORNIA	3.	87-3566308 (FEI number, if applicable)	
+(Date	of incorporation)	(Date of duration, if other than perpetual)	
5			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
4115 SPENCER S	STREET TORRANCE, CA 90503		
	(Principal of	fice street address)	
7901 4TH ST N :	STE 300 ST, PETERSBURG, FL 33702	70.7	TI
	(Current mail	ing address, if different)	=
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	ir
Name:	REGISTERED AGENTS INC		C
Office Address:	7901 4TH ST N STE 300	ing address, it different) O. Box NOT acceptable)	1
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ST. PETERSBURG		
	ST. PETERSBURG (City)	(Zip code)	
			ace .

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	TAKASHI FUKUDA Name:	□Chairman	Name: HIRONORI OHSHIRO			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	4115 SPENCER ST	■Director	4115 SPENCER ST			
■ President	TORRANCE, CA 90503	□President	TORRANCE, CA 90503			
□Vice President		□Vice President				
□Secretary	Treasurer	Secretary	□Treasurer			
□Other	Other	Other	□Other			
□Chairman	Name: HIROKI OHSHIRO	□ Chairman	Name: HIROKI OHSHIRO			
□Vice Chairman	Address: 4115 SPENCER ST	□Vice Chairman	Address:			
□Director		Director				
□President	TORRANCE, CA 90503	□President	TORRANCE, CA 90503			
□Vice President		□Vice President				
☐ Secretary	■ Treasurer	☐ Secretary	□Treasurer			
□Other	Other	□Other				
□ Chairman	Name:	□Chairman	YAEKO OHSHIRO Name:			
□ Vice Chairman	Address:	□ Vice Chairman	Address:			
□Director	4115 SPENCER ST	Director	4115 SPENCER ST			
□President	TORRANCE, CA 90503	□President	TORRANCE, CA 90503			
□Vice President		□Vice President	77. 78			
■ Secretary	Treasurer	□Secretary	OTreamirer = T			
Other	Other	Other	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			
Important Notice: 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. 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 or 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.



Secretary of State Certificate of Status

2024 HAY 30 PM 1: 56

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

Entity Name:

ENAGIC SERVICE USA, INC.

Entity No.:

4806928

Registration Date: 11/02/2021

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 May 14. 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 210126617

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