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SECRETARY OF STATE

## **COVER LETTER**

TO:		tration Section ion of Corporations			
SUBJ	FCT.	Vitamedica, Inc.			
3003	LCI.	Name o	f corporation	- must include suffix	
Dear S	ir or M	adam:			
"Certif	ficate of		of Good Stan	Authorization to Transact Business in Floridading" and check are submitted to register the ss in Florida.	
Please	return :	all correspondence concernin	ig this matter	to the following:	
Andrev	v J. Nor	strud			
			Name of	Person	
Vitame	dica, In	c.			
		· · · · · · · · · · · · · · · · · · ·	Firm/Con	npany	
3030 N	Rocky	Point Drive W Suite 420			
			Addre	ess	
Tampa.	. FL 336	5078			
			City/State a	nd Zip code	
Andrev	v@upex	i.com			
		E-mail address:	(to be used l	for future annual report notification)	
For fur	ther in	formation concerning this ma	atter, please o	call:	
Andrev	v J. Nor	strud	at (813	505-1829	
	Nam	e of Person	Area Cod	e Daytime Telephone Number	
	Regis Divis The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303	: :	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please i	ed is a make ch	check for the following amoreck payable to: FLORIDA DE ing Fee \$78.75 Filing Certificate of	PARTMENT Fee & - C	☐ OF STATE ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Certified Copy Certificate of Certified Cop	Status &

## 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.

rporation; must include "INCORPORATED, rp," "Inc," "Co," or "Corp.")	." "COMPANY," "CORPORATION."		
ble in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florid	a)	
	87-1813984		
under the law of which it is incorporated)	(FEI number, if applicable)		
5	Parmetual		
of incorporation)	(Date of duration, if other than perpetual)		
(SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	<del></del>	
	ice street address)		
t address of Florida registered agent: (P.0		SECRE I	
Andrew J. Noistrud		) (S	
3030 N. Rocky Point Drive W Suite 420		2 35°	
Tampa	Florido 33607	F. 72	
(City)	(Zip code)	<b>5</b> (3)	
application, I hereby accept the appoint	ment as registered agent and agree to act in this ca relative to the proper and complete performance of	ipacity.	
	Definition of the law of which it is incorporate name (Date first transacted business in (SEE SECTIONS 607.1501 & 607.1 and Drive, Henderson, NV 89014 (Principal off (Current mailing address of Florida registered agent: (P.O. Andrew J. Norstrud)  Tampa (City)  Int's acceptance:  Led as registered agent and to accept serve application, I hereby accept the appoint to purply with the provisions of all statutes.	ble in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida.  3. 87-1813984  Funder the law of which it is incorporated)  (FEI number, if applicable)  5. Perpetual  (Date of duration, if other than perpetual)  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  sa Drive, Henderson, NV 89014  (Principal office street address)  (Current mailing address, if different)  4. address of Florida registered agent: (P.O. Box NOT acceptable)  Andrew J. Norstrud  3030 N. Rocky Point Drive W Suite 420  Tampa  (City)  Tampa  Florida  Florida  Timpa  (City)  Timpa  Florida  Timpa  Timp	

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.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **VitaMedica**, **Inc.**, as a DOMESTIC CORPORATION (78) duly organized or formed and existing, or duly qualified or registered, as applicable, under and by virtue of the laws of the State of Nevada since 07/13/2021, and is in good standing in this state.



Certificate Number: B202406104718679

You may verify this certificate

online at https://www.nysilverflume.gov/home

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 06/10/2024.

VHqulan

FRANCISCO V. AGUILAR Secretary of State