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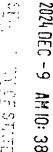
(Requestor's Name)
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COVER LETTER

	tration Section ion of Corpora					
SURIFCT	Enlightened Sc	il Corp				
nobale i.		Name of	corporation -	- must in	clude suffix	····
Dear Sir or M	adam:					
"Certificate o	f Existence," o		f Good Stand	ling" and	l check are subr	t Business in Florida," mitted to register the
Please return	all corresponde	ence concerning	g this matter (to the fo	llowing:	
Mitzie Spauldi	ng					
			Name of P	erson		
Enlightened Sc	oil Corp					
			Firm/Comp	oany		
1003 Landfall	Way, Suite C					
			Addre	SS		
Johns Island, S	C 29455					
	. **		City/State an	d Zip co	de	
mitzie@enligh						
	E	-mail address: (to be used fo	or future	annual report n	otification)
For further in	formation conc	erning this mat	ter, please ca	ıll:		
Mitzie Spauldi	ng	ai	843	300-7	00-7668 Daytime Telephone Number	
Nam	e of Person	·	Area Code		Daytime Teleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		
	ieck payable to:	following amou FLORIDA DEF \$78.75 Filing Certificate of	ARTMENT Fee &	\$78.75	TE Filing Fee & ed Copy	\$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.

1. Enlightened Soi	i Cons.					
	orporation: must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATIC	",иС			
N/A						
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transact	ing business in Florida)			
South Carolina	3					
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	(FEI number, if applicable)			
9/16/2020	5	Perpetual ongoing	rpetual ongoing			
(Date	of incorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)			
March 2024						
·	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liabi	ility)			
6685 SW Suwam	ace Ranch Lane					
•		ice street address)				
1003 Landfall W	ay, Suite C, Johns Island, SC 29455					
	(Current mailir	ng address, if different)				
. Name and street	et address of Florida registered agent: (P.G	D. Box <u>NOT</u> acceptable)				
Name:	CT Corporation System					
Office Address:	1200 South Pine Island Road		202			
mice Address.	Plantation	 , Florida ³³³²⁴	2024 DEC - 9			
	(City)	(Zip code)	pura u			
. Registered ag	ent's acceptance:		42 = 1			
	red as registered agent and to accept servi					
urther agree to c	application, I hereby accept the appoint comply with the provisions of all statutes results and accept the obligations of my po	elative to the proper and compl				
	/ \ (A \) / / (A)	Christine Kelm sistant Secretary				
_	(Registered agent's s	ignature)				

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.

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

A. DIRECTORS	•							
□Chairman ,	Name:	□Chairman	Name:					
□ Vice Chairman	Address: May, Suite C	□Vice Chairman	Address:					
□Director	Johns Island, SC 29455	□Director						
President		□President						
□Vice President		□Vice President						
☐ Secretary	Treasurer	☐ Secretary		□Treasurer				
Other	Other	□Other	<u> </u>	Other				
□Chairman	Name:	□Chairman	Name:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
Director		□Director						
□President		President						
□Vice President		□Vice President						
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer				
⊡Other	Other	□Other		Other				
□Chairman	Name:	□C'hairman	Name:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
□ Director		□Director						
□President		□President						
□Vice President		□Vice President						
□ Secretary	□Treasurer	☐ Secretary		□Treasurer				
Other	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. 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 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.

13. George Taylor, President

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Enlightened Soil Corp, a benefit corporation duly organized under the laws of the State of South Carolina on September 16th, 2020, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 26th day of November, 2024.

Mark Hammond, Secretary of State