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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are optional. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

COVER LETTER

		tration Section on of Corporations				
SUBJE	CT:	HydraPro, Inc.				
		Name	of corporation	- must i	include suffix	
Dear Sir	r or M	adam:				
"Certific	cate of	"Application by Foreign Co Existence," or "Certificate ted foreign corporation to t	of Good Stand	ling" ar	nd check are sub	
Please re	eturn a	all correspondence concern	ing this matter	to the f	ollowing:	
Michael	Burns					
			Name of P	Person		
Scroggin	1 & Bu	rns, LLC				
			Firm/Comp	oany		
647 Min	nosa B	lvd.				
			Addres	SS		
Roswell,	, GA 3	0075				
			City/State an	d Zip c	ode	
M.Burns	@scro	gginlaw.com				
		E-mail address	s: (to be used fo	or future	e annual report r	notification)
For furth	her inf	ormation concerning this n	natter, please ca	ıll:		
Michael	ael Burns 770 640-1101 at ()					
	Name	of Person	Area Code		Daytime Telepi	hone 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 Tallahassee, FL 32314		
	ake ch	theck for the following amovek payable to: FLORIDA Ding Fee	$\begin{array}{ccc} EPARTMENT \\ g \ Fee \ \& & \square \end{array}$	\$78.75	ATE Filing Fee & led Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

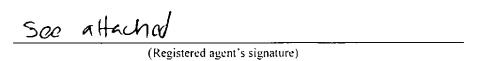
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

Ι.	HydraPro, Inc.					
••		orporation: must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"			
	HydraPro Produ	ets, Inc.				
	(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busin-	ess in Florida)		
2.	Georgia	3.	47-1690943			
٠.	(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)			
4	08/18/2014 5					
٠,		of incorporation)	(Date of duration, if other than perpetual)			
6.	1/1/2025					
U.		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	2		
7.	255 Marvin Mille	r Drive, Atlanta, GA, 30336		25		
	(Principal office street address)					
	255 Marvin Miller Drive, Atlanta, GA, 30336					
		(Current mailin	g address, if different)			
8.	Name and stree	at address of Florida registered agent: (P.C). Box NOT acceptable)	 		
	Name:	Paracorp Incorporated		. 7		
О	ffice Address:	155 Office Plaza Drive. 1st Floor				
		Tallahassee	. Florida 32301			
		(City)	(Zip code)			

9. Registered agent's acceptance:

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



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 Name: Chairman Name: _____ □ Vice Chairman Address: _____ ☐ Vice Chairman Address: Thomas Menefee Todd Mever ■ Director Director □ President □ President □Vice President □ Vice President _____ □Treasurer ☐ Treasurer □ Secretary □ Secretary □Other _____ □Other_____ □Other_____ Name: _____ □ Chairman □ Chairman Name: _____ □ Vice Chairman Address: _____ □ Vice Chairman Address: James Bacon Drew Armstrong **■** Director ■ Director □President □ President □ Vice President □Vice President _____ □Treasurer □ Secretary ☐Treasurer □ Secretary □Other _____ ☐ Other _____ □Other _____ □ Other _____ ☐ Chairman □ Chairman Name: ____ Name: _____ □Vice Chairman Address: ____ Address: _____ ☐ Vice Chairman Nicholas Menefee Director □Director □President □ President ☐ Vice President ____ ☐ Vice President □ Treasurer □ Secretary □ Treasurer

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.

□Other_____

□Other _____

12. Todd Meyer 1 n.s. 210 16 39 EST3

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.

Todd Meyer

Secretary

□Other ___

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 1/3/2025

ENTITY NAME: HydraPro, Inc.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

• • •

Control Number: 14082484

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

HYDRAPRO, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 28297780
Date Inc/Auth/Filed: 08/18/2014
Jurisdiction : Georgia
Print Date : 01/03/2025

Form Number : 211



Brad Raffangerger

Brad Raffensperger Secretary of State