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COVER LETTER

TO:		tration Section ion of Corporations			
SHRI	ECT:	ReadyFestive, Inc.			
30100	LC1.	Name o	f corporation	- must include suffix	
Dear S	Sir or M	adam:			
"Certi	ficate o	"Application by Foreign Corf Existence." or "Certificate of the ced foreign corporation to tra	of Good Stand	ding" and check are submit	Business in Florida." Ited to register the
Please	return	all correspondence concernir	ng this matter	to the following:	
Kristin	a Barne	s			
			Name of	Person	
Ready	Festive.	Inc.			
			Firm/Com	pany	
376 CI	earwate	r Drive			
			Addre	ess	
Ponte	Vedra B	Beach, FL 32082			<u> </u>
			City/State a	nd Zip code	
kristin	a@read	yfestive.com			
		E-mail address	(to be used f	or future annual report not	ification)
For fu	irther in	aformation concerning this m	atter, please c	call:	
Kristina Barnes 415		415	595-6335 Odd Davtime Telephone Number		
	Nan	ne of Person	Area Cod	e Daytime Telepho	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Sec Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Please	make c	check for the following amotheck payable to: FLORIDA DI ling Fee	E PARTMENT g Fee & - [TOF STATE \$78.75 Filing Fee & Certified 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.

-		<u></u>		
(Enter name of co		" "COMPANY." "CORPORATION."		
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business	ess in Florida)	
		81-3873712		
		(FEI number, if applicable)		
9/15/2016	5.			
(Date of incorporation)		(Date of duration, if other than perpetual)		
			<u> </u>	
	(Date first transacted business i	n Florida, if prior to registration) 502 F.S., to determine penalty liability)		
3984 Los Arabis l		502, 100, 100		
	(Principal of	ice street address)		
	(Current maili	ng address, if different)		
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)		
Name:	Kristina Barnes		-7	
Office Address:	376 Clearwater Drive			
	Ponte Vedra Beach	, Florida 32082		
	(City)	(Zip code)	9	
	(Enter name of country "Co"	"Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name Delaware (State or country under the law of which it is incorporated) 9/15/2016 (Date of incorporation) (Date first transacted business in (SEE SECTIONS 607.1501 & 607.1301 & 607.1301) (Principal off (Current mailion) Name and street address of Florida registered agent: (P.4) Name: Kristina Barnes Office Address: Ponte Vedra Beach	(Enter name of corporation: must include "INCORPORATED." "COMPANY." "CORPORATION." "Inc.," "Co.," "Corp." "Inc.," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting busined belaware [State or country under the law of which it is incorporated) [Otate of incorporation] [Otate of inco	

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.

(Registered agent's signature)

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: Kristina Barnes	Chairman	Name:	h Voelker
□Vice Chairman	376 Clearwater Drive	□Vice Chairman	3984 Address:	Los Arabis Drive
□Director	Ponte Vedra Beach, FL	□Director	Lafayette, CA	
President	32082	□President	94549	
□Vice President		□Vice President	 	
□Secretary	■ Treasurer	Secretary		□Treasurer
Other	Other	□Other		Other
□Chairman	Name:	□Chairman	Name:	
	Address:	□Vice Chairman	Address:	
Director		□Director		
□President		□President		
		□Vice President		
Secretary	□Treasurer	□Secretary		☐Treasurer
□Other	Other	□Other		□Other
FT/Ni	Name:	□Chairman	Name:	
□ Chairman				
	Address:	Director		
□Director		□President		
□President		□Vice President		
	☐ Treasurer	□ Secretary		□Treasurer
☐Secretary ☐Other	· _	□Other		□ Other
		·		numoses only Non-indeved
individuals may b	Use an attachment to report more than six (6). The attache added to the index when filing your Florida Department of the index when the same than the same t	ent of State Annual R	leport form.	
12	Grantina of Barres Signature of Director	r Medde or Officer	nt	
The afficer or dir	ector signing this document (and who is listed in number false information submitted in a document to the Depar	er 11 above) affirms t	hat the facts state	ed herein are true and that he of
13. Kristina Ba	rnes, President	on cioning analisacio	<u></u>	

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Delaware The First State

I, KRISTOPHER E. KNIGHT, ACTING SECRETARY OF STATE OF THE STATE
OF DELAWARE, DO HEREBY CERTIFY "READYFESTIVE, INC." IS DULY
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS
OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF JANUARY, A.D.
2025.

Aristopher E. Knight, Acting Secretary of State
Authentication: 202763490

Date: 01-23-25

6152213 8300 SR# 20244658453