FILEDOUGH

Courier Kpress (Requestor's Name)								
(Requestor's Name)								
P.O. Box 387 (Address)								
Monticello FLA (Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Exerces Entry Carrey								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
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SECRETARY OF STATE OF

NOV 01 2016 S. YOUNG 16 OCT 24 PH 3: 4:



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 27, 2016

COURIER XPRESS

SUBJECT: GLIDE RITE CORPORATION

Ref. Number: W16000072420

SEURE JANY OF DIANGE

We have received your document for GLIDE RITE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 116A00023062

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Glide Rite Corporation Name of corporation - must include suffix	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Mela Ranirez	
Name of Person	
Glide Rite Corporation Firm/Company	_
Firm/Company	
21115 Oxnard St.	元の
and the same of th	
Woodland Hills, CA 91367 City/State and Zip code	
	() A
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	i Ş
Mela Ramirez at (818) 988-9500	
Name of Person Area Code Daytime Telephone Number	
STREET/COURIER ADDRESS: MAILING ADDRESS:	
Registration Section Registration Section	
Division of Corporations Division of Corporations	
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status	i &

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 Gli	de Rite	Corpora	Hon				
(Enter name of d "Inc.," "Co.," "C	corporation; must include the corp., "Inc.," "Co.," or	ide "TNCOÀPORA" "Согр.")	TED," "CC	MPANY,""	CORPORATI	ON,"	
C/	ide Rit	Le De	rvice	s Co	co.		
(If name unavail	able in Florida, enter a	ilternate corporate	name adopte	ed for the pur	pose of transa		
2. Calif	ry under the law of wh		3.	95-3	99607	r3	
(State or countr	ry under the law of wh	ich it is incorporate	ed)	(FEI number, i	f applicable)	
4. <u>11/01</u>	e of incorporation)		5				
(Date	of incorporation)			(Date of	duration, if of	her than perpet	ual)
6.							
		irst transacted busin				bility)	
7. 1510 Ma	x Hocks' Roc	ud Svite_ I	, Gyoy Principal off	ردادسان ice address)	.FL. 3	4736	
21115 Ox	word St	1 Nevelland	14:115	CA	9136	7-	· 声
	naval St.	(Current	mailing add	lress, if differ	ent)		8 10-
							72 %表示
8. Name and stree	et address of Florida	registered agent:	: (P.O. Bo	x NOT acc	eptable)		TIE DCT 24 PH 5: 15
Name:	Andrew	0					
Name.	-EINCLY Cinc	- FAYIET					· 第2
Office Address:	1510 Max	Hooks Ro	acl, St	e. I			ज 😇
	Great	evani		. Florida 🗓	34736		
		<u>eλαντί</u> (City)		, <u> </u>	Zip code)		
9 Registered age	ent's acceptance:						
Having been nam	ied as registered ag						
	application, I here comply with the pro						
	omply with the pro- familiar with and a						nunce of my
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		<i>T</i>					
		Cin					
		(Regis	tered 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Andrew Reiner Address: 21115 Oxyuma S.A. Woodland Hills CA 91367 Vice Chairman: Address: ____ Director: Address: _____ Director: ____ Address: _____ **B. OFFICERS** President: Michael Backer Address: 21115 Oxnurd Woodland Hills Ca 91367-Vice President: Address: ____ Secretary: _____ Address: ______ Treasurer: ______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

(Typed or printed name and capacity of person signing application)

-Andrew Reiner CEO

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

GLIDE RITE

FILE NUMBER:

C1287834

FORMATION DATE:

10/02/1985

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, 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 October 12, 2016.

ALEX PADILLA Secretary of State