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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800)221-2972
Fax Number : (718)989-7420

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
CIPHER TECH SOLUTIONS INC.**

Certificate of Status	0
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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.

CIPHER TECH SOLUTIONS, INC.

1. _____
(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 business in Florida)

2. New York _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/22/2004 _____ 5. Perpetual _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. Upon Filing _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 407 N. Highland Ave Upper Nyack, NY 10960 _____
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: BlumbergExcelsior Corporate Services, Inc.
Office Address: 155 Office Plaza Drive, 1st Fl.
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.

Zeina Hassan Assl. Sec
(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.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Keith D. Bertolino
Address: 6810 Deerpath Road, Suite 415 Elkridge, MD 21075

Vice Chairman: _____
Address: _____

Director: Keith D. Bertolino
Address: 6810 Deerpath Road, Suite 415 Elkridge, MD 21075

Director: _____
Address: _____

B. OFFICERS

President: Keith D. Bertolino
Address: 6810 Deerpath Road, Suite 415 Elkridge, MD 21075


Vice President: _____
Address: _____

Secretary: _____
Address: _____

Treasurer: _____
Address: _____

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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. Keith D. Bertolino - President
(Typed or printed name and capacity of person signing application)

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of CIPHER TECH SOLUTIONS, INC. was filed on 10/22/2004, under the name of KBERT ENTERPRISES, LTD., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A certificate changing name to CIPHER TECH SOLUTIONS, INC. was filed on 10/02/2006.

A Biennial Statement was filed 10/16/2006.

A Biennial Statement was filed 09/29/2009.

A Biennial Statement was filed 10/15/2010.

A Biennial Statement was filed 11/07/2012.

A Certificate of Amendment was filed on 09/12/2014.

A Biennial Statement was filed 12/10/2014.

A Biennial Statement was filed 10/19/2017.

A Biennial Statement was filed 01/09/2019.

I further certify that no other documents have been filed by such corporation.

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 01st day of October
two thousand and nineteen.*

Brendan C. Hughes

Brendan C. Hughes
Executive Deputy Secretary of State

