## F21000005648

(	Requestor's Name)		
(	Address)		
	(Address)		
	City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
	(Business Entity Name)		
(Document Number)			
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2021 SEP 30 PM 1: 53

OCT - 4 2021 M. SOLOMON

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: SA Photonics, Inc.	
	orporation - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corpo "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans	ration for Authorization to Transact Business in Florida." Good Standing" and check are submitted to register the net business in Florida.
Please return all correspondence concerning to Ed Gerhardt	his matter to the following:
	Name of Person
SA Photonics, Inc.	
	Firm/Company
12601 Challenger Pkwy, Suite 200	
	Address
Orlando, FL 32926	
Ci	ty/State and Zip code
e.gerhardt@suphotonics.com	
E-mail address: (to	he used for future annual report notification)
For further information concerning this matter	r, please call:
Ed Gerhardt at (	321 848-2717
	Area Code Daytime Telephone 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
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPAI   \$70.00 Filing Fee \$78.75 Filing Fee Certificate of Sta	& 🖸 \$78.75 Filing Fee & 📋 \$87.50 Filing Fee.

## 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.

SA Photonics, I	Inc			
(Enter name of c "Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp," "Inc." "Co." or "Corp.")	." "COMPANY." "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)		
2. Califorma	3.	611427995		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)		
<b>4</b>	_	N/A		
(Date	of incorporation) 5.	(Date of duration, if other than perpetual)		
6,				
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7 120 Knowles Dr.				
·· <u> </u>	, Los Gatos, CA 95032 , (Principal off	ice <u>street</u> address)		
· · · · · · · · · · · · · · · · · · ·				
	(Current mailin	ng address, if different)	*	71121
S. Name and stree	et address of Florida registered agent: (P.C	). Bus. NOT acceptable)		ξ
Name:	Ed Gerhardt		52.5E	<del>င်</del> ယ
	12641 Chatteres Bloom C 12 200	<del></del>		Ö
Office Address:	12661 Challenger Pkwy, Suite 200		7,55	70
	Orlando	. Florida 32826	S:5	
	(City)	(Zip code)	341 5m	Ċŋ
designated in this further agree to co	ed as registered agent and to accept servi- application, I hereby accept the appointn ontply with the provisions of all statutes r	ce of process for the above stated corporation at the pl nent as registered agent and agree to act in this capaci clutive to the proper and complete performance of my	n I	ω
and 1 am <b>fam</b> iliar —	with and accept the obligations of my partitions (Registered agent's vi	sition as registered agent.	uuries,	
	<b>,</b> , <u>,</u> , <u>,</u> , , , , , , , , , , , , , ,	p		

10. Attached is a certificate of existence duty 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 afficers and ar directors [up to six (6) total].

:	
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i	•
1:	
	,

A. DIRECTORS	i					
□ Chairman	Name:	_ Chairman	Name:			
□Vice Chairman	Address:					
Director	Washougal, WA 98671	☐ Director				
<b>■</b> President		☐ President				
□Viœ President		☐ Vice President				_
Secretary	☐ Treasurer	Secretary		Treasurer		
Other	☐ Other	□Other		□Other		
□ Chairman	Cynthia Gambles	. □ Chairman	Name:	echner		
□Vice Chairman	Address: 1401 Oak Avenue	☐ Vice Chairman	Address: 5981			
Director	Los Gatos, CA 94024	Director	San Jose, CA 9			
□President		☐ President				
□Vice President		□Vice President				,
☐Secretary	☐ Treasurer	□ Secretary		□Treasurer	77 ; ·	-
☐Other	Other	Other		□Other	<u> </u>	<u></u>
		•				30
Chairman	Name:	□ Chairman	Name:		<u> </u>	-
_Vice Chairman_	Address:	☐ Vice Chairman	Name: Address:		<u> </u>	<u></u>
□Director		Director				<u>~</u>
□President		☐ President				_
□Vice President		□Vice President				
Secretary	Treasurer	☐Secretary		Treasurer		
Other	Other	□Other		□Oth <del>er</del>		
The officer of direct	se an attachment to report more than six (6). The added to the index when filing your Florida Deport Signature of Director signing this document (and who is listed in not signing this document).	extracent of State Annual Repector or Officer	ort form.	occein oce true	and that h	
the is aware that fals s.817.155, F.S.	e information submitted in a document to the I	Department of State constitute	s a third degree f	clony as provid	led for in	
13	(Typed or printed name and capacity of	person signing application)	SLOENT,	DIRECT	TOE_	



I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: SA PHOTONICS, INC.

File Number: C2431031 Registration Date: 10/17/2002

Entity Type: DOMESTIC STOCK CORPORATION

Jurisdiction: CALIFORNIA

Status: ACTIVE (GOOD STANDING)

As of September 26, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.

SLAL OF BORE

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of September 27, 2021.

SHIRLEY N. WEBER, Ph.D. Secretary of State

Certificate Verification Number: YJN1DNR

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at <a href="mailto:bebizfile.sos.ca.gov/certification/index">bebizfile.sos.ca.gov/certification/index</a>.



September 20, 2021

ED GERHARDT SA PHOTONICS, INC. 12661 CHALLENGER PKWY, SUITE 200 ORLANDO, FL 32826

SUBJECT: SA PHOTONICS, INC. Ref. Number: W21000126403

We have received your document for SA PHOTONICS, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

Mel Solomon
Senior Section Administrator

RECEIVED SEP 30 2021

Letter Number: 321A00022680