

F21000066103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

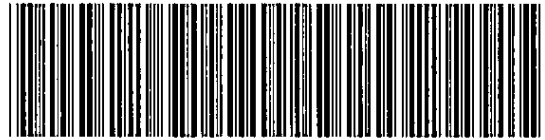
(Document Number)

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S.B.
10/22/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Altairia Corporation

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:

Dakota Rea

Name of Person

Altairia Corporation

Firm/Company

410 SE 16th Ct APT 212

Address

Fort Lauderdale, FL 33316

City/State and Zip code

dakotarea@me.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dakota Rea

at (541) 390-2114

Name of Person

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 DEPARTMENT OF STATE**

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

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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.

1. Altairia Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Altairia International
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Oregon 3. 36-4681329
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/28/2010 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 08/09/20
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 942 Windemere Ave Salem, OR 97304
(Principal office street address)

(Current mailing address, if different)

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

Name: Dakota Rea

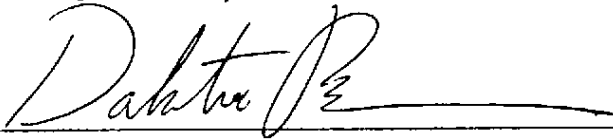
Office Address: 7901 4th St. N Suite 5854

St. Petersburg, Florida 33702
(City) (Zip code)

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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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Dakota Rea

Vice Chairman Address: 7901 4th St. N Suite 5854

Director St. Petersburg, FL 33702

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Dakota Rea

Vice Chairman Address: 7901 4th St. N Suite 5854

Director St. Petersburg, FL 33702

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: Dakota Rea

Vice Chairman Address: 7901 4th St. N Suite 5854

Director St. Petersburg, FL 33702

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

Vice President _____

Secretary Treasurer

Other _____ Other _____

Chairman Name: _____

Vice Chairman Address: _____

Director _____

President _____

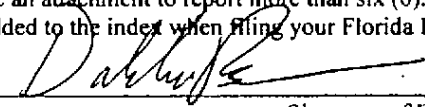
Vice President _____

Secretary Treasurer

Other _____ Other _____

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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.

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

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 333F245J4

I, *SHEMIA FAGAN, SECRETARY OF STATE*, and Custodian of the Seal of said State, do hereby certify:

ALTAIRIA CORPORATION

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.

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In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

A handwritten signature in black ink, appearing to read "Shemia Fagan".

SHEMIA FAGAN, SECRETARY OF STATE

8/20/2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 3, 2021

DAKOTA REA
410 SE 16TH CT APT 212
FORT LAUDERDALE, FL 33316 US

SUBJECT: ALTAIRIA CORPORATION
Ref. Number: W21000120726

RECEIVED
OCT 21 2021

We have received your document for ALTAIRIA CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$150.00.

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.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 921A00021429