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COVER LETTER

TO:	Registration Section		
	Division of Corporations		
	ALEXANDRIA SYSTEMS INC		
SUBJ	ECT:		
	Name of corpora	ation - must include suffix	
Dear S	Sir or Madam:		
"Certi	nclosed "Application by Foreign Corporation ficate of Existence," or "Certificate of Good referenced foreign corporation to transact but	Standing" and check are submitted to regist	
	return all correspondence concerning this m ANDRA HENRI	atter to the following:	
	Nam	e of Person	
ALEX	ANDRIA SYSTEMS INC		
	Firm/	Company	
1031 I	VES DAIRY ROAD, SUITE 228		
	A	ddress	
MIAN	II, FL 33179		
	City/Sta	ate and Zip code	
SUPP	ORT@ALEXANDRIASYSTEMSINC.COM		
-	E-mail address: (to be u	sed for future annual report notification)	~`
	2	,	774
For fu	rther information concerning this matter, plea	ase call:	
1 44	han Singliton 1995	1,322-6630.	:2
71/41	ben Singleton at (95 Name of Person Area	Code Daytime Telephone Number	P3 1: 67
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	:-
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporations	
	The Centre of Tallahassee	P.O. Box 6327	
	2415 N. Monroe Street, Suite 810 Tailahassee, FL 32303	Tallahassee, FL 32314	
Enclo	sed is a check for the following amount:		
	make check payable to: FLORIDA DEPARTM		
□ \$70	0.00 Filing Fee \$ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ☐ \$87.50 F Certified Copy Certified Certified	te of Status &

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. ALEXANDRIA SYSTEMS, 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) MONTANA ъ. 2. (State or country under the law of which it is incorporated) **DECEMBER 24, 2007** (Date of incorporation) (Date of duration, if other than perpetual) Hattinal 1951 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1031 IVES DAIRY ROAD, MIAMI, FL. 33179, SS. 228 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: MIAMI , Florida (City) 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.

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

under the law of which it is incorporated.

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

□Vice Chairman	Name:	□ Chairman	Name:
}	Address:	□ Vice Chairman	1031 IVES DAIRY ROAD
	MIAMI, FL 33179	Director	MIAMI, FL 33179
□ President		■ President	
		□Vice President	
Secretary	☐ Treasurer	Secretary	☐Treasurer
•	_	•	
Other	Other	Other	Other
□Chairman :	ALEXANDRA HENRI	□ Chairman	ALEXANDRA HENRI Name:
	Name:		1031 IVES DAIRY ROAD
	Address: MIAMI, FL 33179	□Vice Chairman	Address:MIAMI, FL 33179
☐ Director _		□Director	
□President _		□President	
Vice President		□ Vice President	
Secretary	Treasurer	E Secretary	Treasurer
Other	Other	Other	□ Other
	ALEXANDRA HENRI		7
□Chairman	Name: 1031 IVES DAIRY ROAD	□ Chairman	Name:
□Vice Chairman	Address:	☐ Vice Chairman	Address:
□Di re ctor _	MIAMI, FL 33179	□ Director	
□President _		President	
□Vice President _		□Vice President	
☐ Secretary	■ Treasurer	☐ Secretary	□Treasurer
Other	Other	Other	Other
individuals may be a	se an attachment to report more than six (6) The idded to the index when filing your Flor da Depa	artment of State Annual Re	eport form.
1 # ·	Signature of Direct		



CERTIFICATE OF EXISTENCE

I, **COREY STAPLETON**, Secretary of State for the State of Montana, do hereby certify that:

ALEXANDRIA SYSTEMS, INC.

duly filed its Articles Of Incorporation for the domestic entity in this office on **December 24, 2007,** and on that date was authorized to transact business in this state for a term of Perpetual duration.

Payment is reflected in the records of the Secretary of State for all fees owed to the Secretary of State.

The most recent annual report has been filed with this office.

No articles of dissolution have been placed on record in this office by said corporation and the records indicate the corporation is in good standing under the laws of the State of Montana.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.

THE STATE

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 18th day of November, 2020.

COREY STAPLETON

Montana Secretary of State

Certificate Number: 111820200008



Franklin, Sharon D.

From: Alexandra Henri <ahenri2488@gmail.com>
Sent: Monday, December 21, 2020 11:44 AM

To: Franklin, Sharon D.

Subject: ALEXANDRIA SYSTEMS INC

EMAIL RECEIVED FROM EXTERNAL SOURCE

0 U

Happy Monday Sharon,

My name Alexandra Henri, my company is Alexandria Systems Inc, I accidentally filed the corp in Florida instead of filing the foreign corp. I will not be filing Alexandria Systems Inc in Florida just the foreign corp.

I was advised to send you an email to process this under my consent. Please let me know if there is anything else that you need from me.

This is in regard to Document number W20000144420

Thank you and happy holidays. Alexandra Henri