

F14 6000001417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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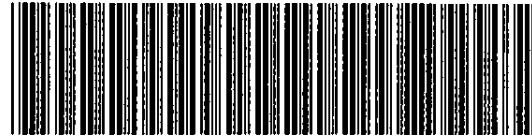
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAR 28 AM 10:31

\*ce 3/31/14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

14 MAR 25 PM 3:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 5, 2014

EDWARD STAHLIN  
BOX 495  
DEXTER, MI 48130

SUBJECT: SIMPLEX TECHNOLOGIES INC.  
Ref. Number: W14000014361

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

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

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) 245-6052.

Carol Mustain  
Regulatory Specialist II

Letter Number: 714A00004856

714A

**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. Simplex Technologies Inc.  
(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. SOUTH DAKOTA 3. Applied For  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/5/2014 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 50 Memorial Plaza Unit 403, Pleasantville, NY 10570  
(Principal office address)  
50 Memorial Plaza Unit 403, Pleasantville, NY 10570  
(Current mailing address)

8. full service technology  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

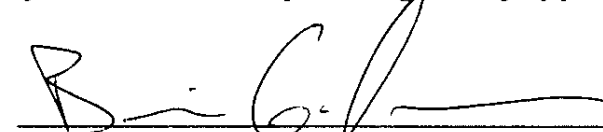
Name: Brian G. Drew

Office Address: 319 S Coteau St

Titusville, Florida 32780  
(City) (Zip code)

**10. 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)

11. 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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DIVISION OF CORPORATIONS  
14 MAR 28 AM 10:31

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Brian G. Drew

Address: 50 Memorial Plaza Unit 403, Pleasantville, NY 10570

**B. OFFICERS**

President: Brian G. Drew

Address: 50 Memorial Plaza Unit 403, Pleasantville, NY 10570

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

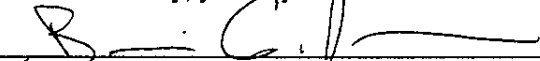
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13. 

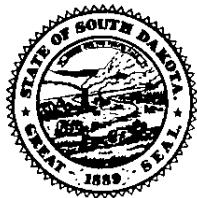
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. Brian G. Drew, President & Director

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

# State of South Dakota



## OFFICE OF THE SECRETARY OF STATE

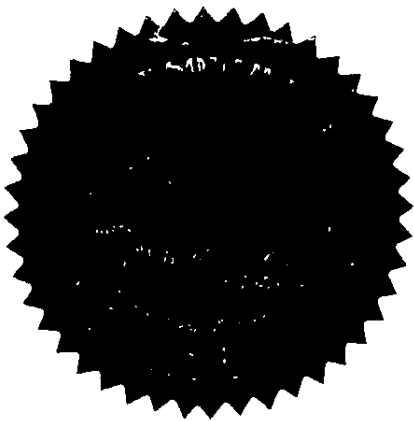
### Certificate of Existence Domestic Corporation

ORGANIZATIONAL ID #: DB058730

I, **Jason M. Gant**, Secretary of State of the State of South Dakota, do hereby certify that **SIMPLEX TECHNOLOGIES INC.**, was duly incorporated under the laws of this state on **February 5, 2014** for a **perpetual** term of existence.

I, further certify that said corporation has complied with the laws of this State relative to the formation of corporations of its kind and is now a regularly and properly organized and existing corporation under the laws of this State and is in good standing, as shown by the records of this office. The annual report required by law has been filed with our office and articles of dissolution have not been filed. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the corporation's financial condition or business activities and practices. Such information is not available from this office.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this February 20, 2014.



**Jason M. Gant**  
Secretary of State