

F14000005269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

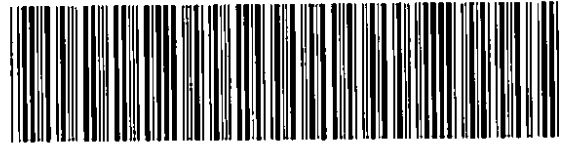
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer

Office Use Only



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2024 OCT 30 AM 9:57

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2024 OCT 30 PM 1:33

SECRETARY OF STATE  
TALLAHASSEE, FL

**Sunshine State Corporate Compliance Company**

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 10/30/2024

**\*\*WALK IN\*\***

ENTITY NAME Access Newco Inc.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXXXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

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**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts & Amendments*

*Certificate of Good Standing*

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$35

ACCOUNT #: I20160000072

*Σ R J/10*

Please call Tina at the above number for any issues or concerns. Thank you so much!

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F14000005269

(Document number of corporation (if known))

1. ACCESS NEWCO, INC.

(Name of corporation as it appears on the records of the Department of State)

2. New York

(Incorporated under laws of)

3. 12/12/2014

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 01/02/2015

5. ACCESS INDUSTRIES, INC.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. **If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida

(City)

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

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9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

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10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

/s/ Alejandro Moreno

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Alejandro Moreno

(Typed or printed name of person signing)

Secretary / Authorized Person

(Title of person signing)

**FILING FEE \$35.00**

New York State Department of State  
Division of Corporations, State Records and Uniform Commercial Code  
**COPY REQUEST/CERTIFICATE OF STATUS RECEIPT**

SINGLEFILE TECHNOLOGIES INC.  
113 CHERRY STREET  
SUITE 70875  
SEATTLE WA 98104

**DATE:** 10/30/2024 **TRANSACTION NUMBER:** 202410300000845

**ENTITY INFORMATION:**

**ENTITY NAME:** ACCESS INDUSTRIES, INC.  
**DOS ID:** 4668539  
**DATE OF INITIAL DOS FILING:** 11/19/2014

<b><u>REQUESTED SERVICES:</u></b>	<b><u>NUMBER REQUESTED:</u></b>	<b><u>FEE:</u></b>
UNCERTIFIED COPY(\$5.00)		\$0.00
CERTIFIED COPY(\$10.00)		\$0.00
CERTIFICATE OF STATUS - SHORT FORM(\$25.00)		\$0.00
CERTIFICATE OF STATUS - LONG FORM(\$25.00)	1	\$25.00
EXPEDITED HANDLING		\$0.00

<b><u>TOTAL PAYMENTS RECEIVED:</u></b>	\$25.00
CASH:	\$0.00
CHECK/MONEY ORDER:	\$0.00
CREDIT CARD:	\$0.00
DRAWDOWN ACCOUNT:	\$25.00
REFUND DUE:	\$0.00

<b><u>REQUESTED COPY</u></b>	<b><u>FILE DATE</u></b>	<b><u>FILE NUMBER</u></b>
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STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** ACCESS INDUSTRIES, INC.  
**DOS ID Number:** 4668539  
**Entity Type:** DOMESTIC BUSINESS CORPORATION  
**Entity Status:** EXISTING  
**Date of Initial Filing with DOS:** 11/19/2014  
**Statement Status:** CURRENT  
**Statement Due Date:** 11/30/2024

I certify that the following is a list of documents on file in the Department of State for said entity:

**Document Type:** CERTIFICATE OF INCORPORATION  
**Date of Filing:** 11/19/2014  
**Entity Name:** ACCESS NEWCO, INC.

**Document Type:** CERTIFICATE OF AMENDMENT  
**Date of Filing:** 01/02/2015  
**Name Changed To:** ACCESS INDUSTRIES, INC.

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 11/01/2016

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 11/01/2018

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**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 11/02/2020  
**Effective Date:** 11/01/2020

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**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 11/16/2022  
**Effective Date:** 11/01/2022

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**Document Type:** CERTIFICATE OF CHANGE BY ENTITY  
**Date of Filing:** 03/08/2024

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No information is available from this office regarding the financial condition, business activity or practices of this entity.

WITNESS my hand and official seal of the Department  
of State, at the City of Albany, on October 30, 2024 at  
09:52 A.M.



WALTER T. MOSLEY  
Secretary of State

*Brandon C. Hughes*

BRENDAN C. HUGHES  
Executive Deputy Secretary of State

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Division of Corporation's Document Authentication Website at <http://ecorp.dos.ny.gov>