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SECRETARY OF STATE FALLAHASSEE, FLORIDA

1/4

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: <u>Eastridge Technology</u> , <u>Inc.</u> 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:
Jenniker A Willer
Jennifer A Miller Name of Person
Eastridge Technology Inc
J Firm/Company
102 W 350 St. STE 1250
Address
Winston-Salem, NC 27101 City/State and Zip code
E-mail address: (to be used for fulure annual report notification)
E-mail address: (to be used for fujure annual report notification)
For further information concerning this matter, please call:
Jennifer Miller at (336) 345-7850
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
New Filing Section New Filing Section
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF F.	
1. Eastridge Technology, Inc.	
(Enter name of corporation) must include "INCORPORATED," "COMPANY," "CORPORATION" "Inc.," "Co.," "Corp.," "Inc.," "Corp.," or "Corp.")	٧."
me., co., corp, me, co, or corp.)	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transactir	ng business in Florida)
2. North Carolina 3. 56-207139	7
(State or country under the law of which it is incorporated) (FEI number, if ap	plicable)
4. (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to	exist or "perpetual")
6. 2/1/2015	, class or perpendicularly
(Date first transacted business in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liabil	
7. 102 W. 3' St. STE 1250 Winston Sa (Principal office address)	en NC 27101
· •	
(Current mailing address)	
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: Nicholas Kasselle	7 <u>8</u> 8
Office Address: 330 SF 2nd Ave Cle	LAM AR
Deerfield Beach, Florida 33441	27 P≥
(City) (Zip code)	
9. Registered agent's acceptance:	STAT
Having been named as registered agent and to accept service of process for the above state designated in this application, I hereby accept the appointment as registered agent and agr	
further agree to comply with the provisions of all statutes relative to the proper and comple	ete performance of my
duties, and I am familiar with and accept the obligations of my position as registered agen	t.
$A \cdot A \cdot P \cdot A$	
Nicholas Tassape	
(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. Names and business addresses of officers and/or directors:



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A. DIRECTORS	· · · · · · · · · · · · · · · · · · ·
Chairman: Travis A. Hargett	15 MAR 27 PM 1: 35
Address: 102 W. 350 St STE 1250	SECRETARY OF STATE
Winston Salem NC 27101	TALLAHASSEE, FLORIDA
Vice Chairman: Jennier Miller	***********
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS President: Travis Hargett Address: SAME T	
Vice President: Tennifer A Miller	
Address:	
Secretary: Dhomas M Nichols TIL	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing add	litional officers and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 ab are true and that he or she is aware that false information submitted in a docume a third degree felony as provided for in s.817.155, F.S.	
13. Jennifer A Miller	
(Typed or printed name and capacity of person signing	application)



NORTH CAROLINA Department of the Secretary of State

15 MAR 27 PM 1:35

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

EASTRIDGE TECHNOLOGY, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 23rd day of January, 1998, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 24th day of March, 2015.

Elaine J. Marshall

Secretary of State