

F15000001892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

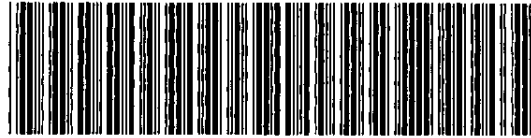
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15 APR 28 PM 1:42
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 911 Products, INC
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:

Marquis Alexander

Name of Person

911 Products, INC

Firm/Company

2600 Messina Ave

Address

Orlando, FL 32811

City/State and Zip code

Marquis Y Alex @ gmail.com

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

For further information concerning this matter, please call:

Marquis Alexander

Name of Person

at (407-) 423-8050

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$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

**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. 911 Products 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. MT 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-19-2007 5. "perpetual"
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 2600 Messina AVE Orlando, FL 32811
(Principal office address)

2600 Messina AVE Orlando, FL 32811
(Current mailing address)

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

Name: Marquis Alexander

Office Address: 2600 Messina Ave

Orlando, Florida 32811
(City) (Zip code)

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.

Marquis Alexander
(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.

15 APR 28 PM 1:42
STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: Marquis Alexander

Address: 2600 Messina Avenue
Orlando, FL 32811

B. OFFICERS

President: Marquis Alexander

Address: 2600 Messina Avenue
Orlando, FL 32811

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. Marquis Alexander

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.

13. Marquis Alexander

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

SECRETARY OF STATE STATE OF MONTANA

CERTIFICATE OF FACT

I, **LINDA McCULLOCH**, Secretary of State of the State of Montana, do hereby certify that on **OCTOBER 19, 2007**, **911 PRODUCTS, INC.** was incorporated under the laws of the State of Montana and received its Certificate of Incorporation for a term of perpetual duration.

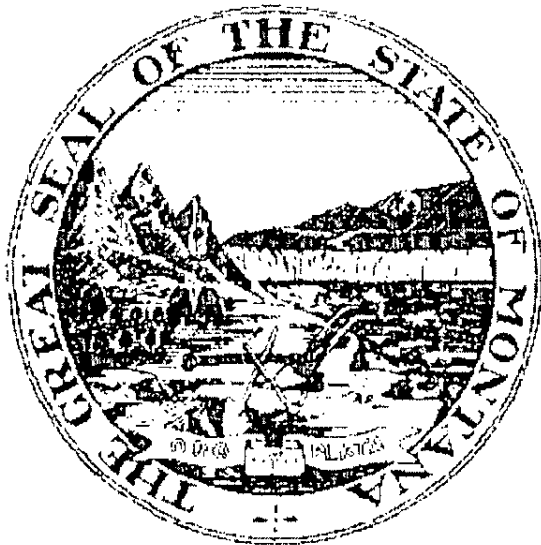
I further certify that on **APRIL 9, 2015** the Corporation filed their required annual report with this office.

I further certify that the registered agent on record is **PRIMO, INC., 1215 11TH AVENUE, HELENA MT 59601**.

I further certify that the name and address of the officer and director on record is **MARQUES ALEXANDER (PRESIDENT/DIRECTOR), 2600 MESSINA AVE, ORLANDO FL 32811**.

I further certify that the purpose of the Corporation is **ANY LAWFUL BUSINESS**.

I further certify that the Corporation has filed all required reports with this office and that no notice or decree of dissolution has been filed with this office and it is in good standing.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this April 15, 2015.

LINDA McCULLOCH
Secretary of State

Certified File Number: **D176171**