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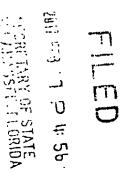
(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
(onyours.z.pr none ")
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1016-81085

Office Use Only



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FEB 2 0 2017





FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2016

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ROBYN DANIEL 228 JANSMITH LN RALEIGH, NC 27615

SUBJECT: PROTON TECHNOLOGIES, INC.

Ref. Number: W16000081085

We have received your document for PROTON TECHNOLOGIES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Letter Number: 616A00025749

Tanisha L Washington Regulatory Specialist II

www.sunbiz.org

COVER LETTER

T0: Registration Section Division of Corporations	
SUBJECT: Proton Technol Name of corporate	tion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
Robyn Daniel Name	
Name	of Person
Proton Technologie	es, Inc.
228 Jansmith Ln.	ddress
Raleigh, NC 27615 City/Stat	
Chystan	e and zip code
rdaniel @ protontechs. d E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	
Robyn Daniel at (919) Name of Person Area (7,673-8154
Mame of Person Area C	Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$\overline{\overli	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, 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.	Proton 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 Flo	rida)					
2.	DELAWARE 3. 46.357.3234						
	(State or country under the law of which it is incorporated) (FEI number, if applicable)						
4.	. 8 20 2013 5. (Date of incorporation) (Date of duration, if other than perpetual)						
	(Date of incorporation) (Date of duration, if other than perpetual)						
6	NA						
(Date first transacted business in Florida, if prior to registration)							
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)						
7.	228 Jansmith Ln. Raleigh, NC 27615 (Principal office address)						
	(Principal office address)						
	(Current mailing address, if different)						
o	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	-11					
ο.	s. Name and street address of Piorida registered agent. (1.0. nox 1401 acceptance)	E-107-0-1-					
	Name: Robert Wagner	\Box					
O	Office Address: 2925 Mall Hill Dr. Lakeland Florida 33810	D					
	1 alv 1 and 22 210 BH 5						
	Lakeland Florida 33810 gm 5						
	(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.

Left Wagner (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.				
A. DIRECTORS				
Chairman:				
Address:				
				
Vice Chairman:			<u></u>	
Address:				
Director:				
Address:				
Audiess.				
Discourse		-		
Director:				•
Address:				
	i ,		<u>-</u>	
B. OFFICERS	1.25 1.25 1.25 1.25 1.25 1.25 1.25 1.25		T	
President: Brad Holton	12.45			
Address: 228 Jansmith Ln.			TTI	
Raligh, NC 27615	STATE ORID	. E.		
Vice President:	- RE RES	2		
Address:	 			
Secretary:	<u> </u>			
Address:				
Treasurer:	<u>.</u>		 -	
Address:	. <u>.</u>			
NOTE: If necessary, you may attach an addendum to the application listing additional add	onal officers a	nd/or o	lirectors.	
12. Signature of Director or Officer			<u></u>	
Signature of Director or Officer	affirms that	tha fa	ore stated h	rain
The officer or director signing this document (and who is listed in number 11 above are true and that he or she is aware that false information submitted in a document to	o the Departn	nent of	State const	itutes
a third degree felony as provided for in s.817.155, F.S.				
13. BRED 1-1=1-02 - PIES, CLENT (Typed or printed name and capacity of person signing app	olication)			
(.) tranger the many and antique of the property of the	•			



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PROTON TECHNOLOGIES INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF JANUARY, A.D.

2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROTON

TECHNOLOGIES INC." WAS INCORPORATED ON THE TWENTIETH DAY OF AUGUST,

A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

THYS OF THE STATE OF THE STATE

Authentication: 201877678

Jeffrey W. Bullock, Secretary of State

Date: 01-17-17