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(Requestor's Name)

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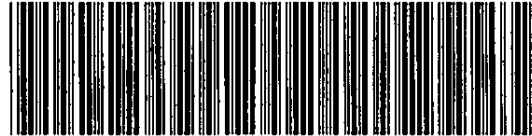
(Business Entity Name)

(Document Number)

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FILED
2018 APR -11 P 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/15/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SENSYS CORP.

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:

MARSHA SIHA

Name of Person

INCFILE.COM LLC

Firm/Company

134 VINTAGE PARK BLVD A-50

Address

HOUSTON TX 77070

City/State and Zip code

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

For further information concerning this matter, please call:

MARSHA SIHA

Name of Person

at (888) 462-3453 X 701

Area 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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

2011 APR - 4 P 12:22
TALLAHASSEE, FL
DIVISION OF CORPORATIONS
REGISTRATION SECTION

FILED

**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. SENSYS CORP.

(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. ALASKA

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. 2/1/2016

(Date of incorporation)

5.

(Date of duration, if other than perpetual)

6. UPON REGISTRATION

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

7. 1948 Dairy Rd

(Principal office address)

Melbourne, FL 32904

(Current mailing address, if different)

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

Name: Legalinc Corporate Services Inc.

Office Address: 5237 Summerlin Commons Ste 400

Fort Myers, FL

(City)

, Florida 33907

(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.

Patty Schiemann

(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.

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2018 APR - 4 P 2:28
SECRETARY OF STATE
TALLAHASSEE, FL

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

A. DIRECTORS

Chairman: Mark Westfield

Address: 877 N. Highway A1A
Indiatlantic FL 32903

Vice Chairman: _____

Address: _____

Director: RENEE KENT

Address: 8905 First Tee Road
Port St. Lucie FL 34986

Director: _____

Address: _____

B. OFFICERS

President: RENEE KENT

Address: 8905 First Tee Road
Port St. Lucie FL 34986

Vice President: _____

Address: _____

Secretary: Mark Westfield

Address: 877 N. Highway A1A, Indiatlantic FL 32903

Treasurer: RENEE KENT

Address: 8905 First Tee Road, Port St. Lucie FL 32903

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

12. *Renée M. Kent*

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. RENEE KENT - President

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

FILED
2010 APR - 4 PM 12:22
TALLAHASSEE, FLORIDA

Alaska Entity #10035356

State of Alaska
Department of Commerce, Community, and Economic
Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

SENSYS CORP.

This entity was formed on February 01, 2016 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective **March 29, 2018**.

A handwritten signature in cursive script that reads "Mike Navarre".

Mike Navarre
Commissioner

2018 APR -4 P 12:22
CLERK OF STATE
TALLAHASSEE, FLORIDA

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