

F/18000002781

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : ALRON ENTERPRISES, INC.  
Account Number : I20000000113  
Phone : (321)951-7626  
Fax Number : (321)723-8218

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@teamloud.com

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TELLAHASSEE, FL

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**Loud Performance Training, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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JUN 14 2018

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

Loud Performance Training, Inc.

**SUBJECT:** \_\_\_\_\_  
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:

Jenni Gilray

\_\_\_\_\_  
Name of Person

Alron Corps, Inc.

\_\_\_\_\_  
Firm/Company

3990 Minton Rd

\_\_\_\_\_  
Address

Melbourne, FL 32904

\_\_\_\_\_  
City/State and Zip code

info@teamloud.com

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

For further information concerning this matter, please call:

Jenni Gilray

at ( 321 ) 951-7626

\_\_\_\_\_  
Name of Person\_\_\_\_\_  
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

H186001759283

# 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. Loud Performance Training, 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. Pennsylvania 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)  
4. June 4, 2018 5. (Date of incorporation) (Date of duration, if other than perpetual)

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

7. 795 Huntington St NE Palm Bay, FL 32907  
(Principal office address)

(Current mailing address, if different)

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

Name: Derek Natcher  
Office Address: 795 Huntington St NE  
Palm Bay, Florida 32907  
(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.

  
(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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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

## A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Derek Natcher

Address: 795 Huntington St NE Palm Bay, FL 32907

Director: \_\_\_\_\_

Address: \_\_\_\_\_

## B. OFFICERS

President: Derek Natcher

Address: 795 Huntington St NE Palm Bay, FL 32907

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Derek Natcher

Address: 795 Huntington St NE Palm Bay, FL 32907

Treasurer: Derek Natcher

Address: 795 Huntington St NE Palm Bay, FL 32907

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

12. Derek Natcher

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. Derek Natcher, President

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

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STATE OF FLORIDA  
DEPARTMENT OF STATE

H180001759283

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE

06/11/2018

FILED  
18 JUN 13 AM 8 51  
SECRETARY OF STATE  
HARRISBURG, PA 17103

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Loud Performance Training, Inc.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

*Robert Lanes*

Acting Secretary of the Commonwealth

Certification Number: TSC180611110663-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>