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(Requestor's Name)								
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(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
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COVER LETTER

TO:	Registration S Division of C				
SUB.	IECT:	Harbor America Hol	dings, Inc.		
		Name of corpor	ration - mu	st include suffix	
Dear !	Sir or Madam:				
"Certi	ficate of Exister	ation by Foreign Corporationce," or "Certificate of Goodign corporation to transact b	d Standing"	and check are sub	
Please	return all corre	spondence concerning this r	natter to th	e following:	
	Jamie Ho	dges			
		Nan	ne of Perso	n	
		Firm	/Company		
	2600 W.	Geronimo Pl., #100			
		-	Address		_
	Chandler	, AZ 85224			
		City/S	tate and Zip	code	
	business	sregistration@vensure.com			
		E-mail address: (to be a	ised for fut	ure annual report n	otification)
For fu	rther informatio	n concerning this matter, plo	ease call:		
	la-sia Dadea	- 40	0	444 4004	
	Jamie Hodge: Name of Pers		. Code	444-1221 Daytime Teleph	one Number
	Name of Fers	Mica	Code	Daytime Teleph	ione ivamoer
	Registration S Division of Co Clifton Buildi	orporations ng ve Center Circle		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations
Enclo:	sed is a check fo	or the following amount:			
⊐ \$7 [,]	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		.75 Filing Fee & ified Copy	S87.50 Filing Fee. Certificate of Status &

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.		merica Holdings, Inc. oration; must include "INCORPORATED,"	HCCOMPANIV	" "CORDODATION		
		oration; must include "INCORPORATED," "Inc," "Co," or "Corp.")	COMPANY	," "CORPORATION	I , `	
		,,,				
	(If name unavailable	in Florida, enter alternate corporate name a	dopted for the	purpose of transacting	g business in Florida)	
2.	Delawa	re3.	0	1-0738710		
	(State or country u	nder the law of which it is incorporated)		(FEI number, if app	plicable)	
4.	07/15/20	002 5.				
	(Date of	incorporation)	5. (Date of duration, if other than perpetual)			
6.						
		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15			tv)	
			02, 1 ² .5., 10 dea	critime penanty navin	(E	
7	21977 Wallis Dr					
		(гппсіра	al office addres	is)		
-	2600 W. Geron			~ .	 55, 2	
		(Current mailin	g address, it di	merent)	LLA ECF	-77
0	Mana and atmata	ddaaa af Planida aasiaa ad aa aa a 🕜 🔿	D NOT -		AUG CRETA	
٥.	Name and <u>street a</u>	ddress of Florida registered agent: (P.O	. Box <u>NO1</u> a	(cceptable)	16 ARY ASS	
	Name:	Cogency Global, Inc.			EE OF	Ш
Ωf	fice Address:	115 N. Calhoun St., #4			AM II: 51 OF STATE E. FLORIG	O
O1	inco readross.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,)RIG	
	-		, Florida		<u> </u>	
		(City)		(Zip code)		
9.	Registered agent'	s acceptance:				
	•	as registered agent and to accept service	e of process j	for the above stated	d corporation at the p	olace
		plication, I hereby accept the appointm				
	-	ply with the provisions of all statutes re iliar with and accept the obligations of	_	_		y
65 FA I	ues, unu 1 um jum	· · · · · · · · · · · · · · · · · · ·	my position (ы гедысген идепі	,	
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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.

(Registered agent's signature)

Sherman Chan, Assistant Secretary

11. Names and business addresses of officers and/or directors: A. DIRECTORS Address: ____ Vice Chairman: Address: _____ Director: Address: Director: **B. OFFICERS** President: ______Douglas Lowery Address: 21977 Wallis Dr. Porter, TX 77365 Vice President: Address: Address: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. _ Now herey 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. <u>Douolas Lowery President</u> (Typed or printed name and capacity of person signing application)



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

DELAWARE, DO HEREBY CERTIFY "HARBOR AMERICA HOLDINGS 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 THIRTIETH DAY OF JULY, A.D. 2018.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HARBOR AMERICA HOLDINGS INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF JULY, A.D. 2002.

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

Authentication: 203156735

Date: 07-30-18