F180000004790

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Čit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	· · · · · · · · · · · · · · · · · · ·

Office Use Only



100319784131

10/23/18--01001--006 **78.75

18 OCT 22 AH I2: 20

K SALY OCT 23 2018 18 OCT 22 PM 3: 27

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE10/22/20		**WALK IN*
	MACH ALERT INC	WALK IIV
INTITY NAME_	MACH ALERT, INC.	
OCUMENT NUI	MBER	
	PLEASE FILE THE ATTACHED AND RETURN	
	Plain Copy	
×××××	Certified Copy	
	Certificate of Status	
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	
	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
OUNTRY OF DE	ESTINATION	
'UMBER OF CER	RTIFICATES REQUESTED	
OTAL OWED \$	678.75 CHECK # 5376	_
lease call Tin	ina at the above number for any issues or concerns. Thank you s	so much!

COVER LETTER

TO:	O: Registration Section Division of Corporations					
eun)		MACE	I ALEF	RT, IN	C.	
SUBJ	ECT:	Nam	e of corpor	ation - mus	at include suffix	
Dear S	Sir or Madam:					
"Certi	ficate of Existe		ite of Good	Standing"	and check are sub	ct Business in Florida," omitted to register the
Please	return all corr	espondence concer	ning this n	natter to the	e following:	
			Nam	e of Persoi		
			Firm/	'Company		
	 		ļ.	Address		
			City/St	ate and Zip	code	
andrew	/j624@gmail.co					
		E-mail addre	ss: (to be u	ised for futi	ure annual report i	notification)
For fu	ther informati	on concerning this	matter, ple	ase call:		
			_ at ()		
	Name of Per	rson	Area	Code	Daytime Telep	hone Number
	Registration Division of C Clifton Build	Corporations ling ive Center Circle	SS:		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations ,
Enclos	ed is a check f	or the following an	nount:			
☐ \$70	0.00 Filing Fee	☐ \$78.75 Fili Certificate			75 Filing Fee & ified 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. Mach Alert, The (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. <u>Celembre</u>
3. 83-2235502
(State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 10/15/2018
5. (Date of incorporation)
6. Upon filing
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) High Road, Cosang, NY 14830
(Principal office address) (Current mailing address, if different) 3. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Marken H. Barlow

Lo S. Nyer Borlow

401 F Jackson Street, Saite 2225

Tompo , Florida 33602

(City) (Zip code) Name: Iffice Address: Registered agent's acceptance: twing been named as registered agent and to accept service of process for the above stated corporation at the place signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I ther agree to comply with the provisions of all statutes relative to the proper and complete performance of my ties, and I am familiar with and accept the obligations of my position as registered agent.

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction or the law of which it is incorporated.

(Registered agent's signature)



11. Names and business addresses of officers and/or directors:	AH 12:
A. DIRECTORS	
Chairman: Andrew A. Jacobson	
Address: 136 Hab Road	
Cocn. 29, NY 14830	
Vice Chairman:	
Address:	
Director:	
Address:	
······································	
Director:	
Address:	
B. OFFICERS	
President: Andrew A. Jacobson	
Address: 136 High Road Corney, NY 14830	
Cocning, NY 14830	
Vice President:	
Address:	<u> </u>
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition	al officers and/or directors.
12. Signature of Director or Officer	
Signature of Director or Officer 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 a third degree felony as provided for in s.817.155, F.S.	attirms that the facts stated herein
13. Andrew A Jacobson, President	

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

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MACH ALERT, INC." IS DULY INCORPORATED

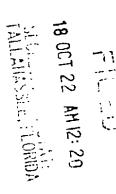
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MACH ALERT, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF OCTOBER, A.D. 2018.

OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2018.

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





Authentication: 203654371

Date: 10-22-18

7102309 8300 SR# 20187250154