

11/26/2018

F18000005346

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000335702 3)))



H180003357023ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

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

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

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

Email Address: _____

FILED
2018 NOV 26 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 NOV 26 PM 12:00
RECEIVED

FOREIGN PROFIT/NONPROFIT CORPORATION IOTAS, INC.

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

Electronic Filing Menu

Corporate Filing Menu

Help

**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. IOTAS, 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. Florida Delaware 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 31, 2014 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 3030 N. Rocky Point Dr. STE 150A, Tampa, FL 33607
(Principal office address)

(Current mailing address, if different)

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

Name: Northwest Registered Agent, LLC.

Office Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, Florida 33607
(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.

FILED
2010 NOV 26 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Sce Pike

Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, FL 33607

Vice Chairman: Jeremy Steinhauer

Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, FL 33607

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: James Motley

Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, FL 33607

Vice President: Sce Pike

Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, FL 33607

Secretary: Sce Pike

Address: 3030 N. Rocky Point Dr. STE 150A Tampa, FL 33607

Treasurer: Chad Summers

Address: 3030 N. Rocky Point Dr. STE 150A Tampa, FL 33607

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

12. James Motley
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. James Motley, President

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

FILED
2018 NOV 26 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IOTAS, 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 TWENTY-SIXTH DAY OF NOVEMBER, 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 "IOTAS, INC." WAS INCORPORATED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2014.

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

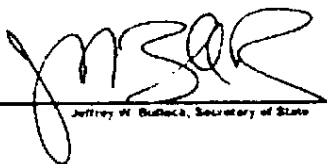
FILED
2018 NOV 26 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



5504852 8300

SR# 20187787185

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 203957351

Date: 11-26-18