

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H18000335890 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC

Account Number : 120080000045

Fax Number

: (302)645-7400 : (302)645-1280

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

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FOREIGN PROFIT/NONPROFIT CORPORATION BYTE, Inc.

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EXAMINER

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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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc," "Co," or "Co.p.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 4610 S. Suncoast Blvd #829, Homosassa Springs, Florida, 34447 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Brandon Jackson Name: 4610 S. Suncoast Blvd #829 Office Address: Homosassa Springs (City)

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.

II. Name	(((H18000335890 3)))			
A. DIRE	s and business addresses of officers and/or directors:			
	r/a			
Chairman:				
Address: ~				
_				
Vice Chairr	n/a nan:			
Address: _			 .	-
			 _	
Director:	/a			_
Address:	78			
				_
	Frandon Jackson	··		
Director: _				
Address: _	4610 S. Suncoast Blvd #829, Homosassa Springs Florida 34447			
_				_
B. OFFIC	ERS			_
President:	n/a			
Address:			 , <u>-</u>	-
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Vice Preside	n/a		 .	-
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7.007C33		- 	NON BIBE	~~
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Address:		——————————————————————————————————————	P	_[]
Treasurer: _	Ja	<u>32</u>	<u>~</u>	
Address:		<u> </u>	S	
NOTE: if	necessary, you may attach an addendum to the application listing additional officers and/o	r director:	s.	
	and tack san			
/	Signature of Director or Officer		41	_
ire thic and	or director signing this document (and who is listed in number 11 above) affirms that the that he or she is aware that false information submitted in a document to the Department see felony as provided for in s.817.155, F.S.			
	Jackson, CEO			
	(Typed or printed name and capacity of person signing application)			_

11. Names and business addresses of officers and/or directors; (Additional List):

B. OFFICERS

CEO:

Brandon Jackson

Address: 4610 S. Suncoast Blvd *829, Homosassa Springs Florida 34447



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BYTE, 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 "BYTE, INC." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF NOVEMBER, A.D. 2017.

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

6637569 8300 SR# 20187791435

SR# 20187791435
You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Burtock, Secretary of State

Authentication: 203958853

Date: 11-26-18