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19 JAN 23 PN 2: 2:
SECRETARY OF STATE
TALLAHASSEE BLOOD A

(JA!) 26

To Florida Department of State

Subject: Letter Number 519A00000417

Attention: Octavia L. Simmons

Enclosed is an amended application for status as a Foreign Corporation in Florida.

I have amended questions number 6. I thought this was the date we purchased the business. We opened our office in Sarasota Florida on July 1, 2018.

Additionally, I have attached the 2019 registration from the state of Georgia as well as a Certificate of Existence. These were both electronically delivered. These are my originals as printed from the Georgia receipts.

Sincerely,

le/rome W. Johnsøn



August 11, 2018

JEROME JOHNSON 2621 CATTLEMAN RD, STE 1 SARASOTA, FL 34232

SUBJECT: INTELESYS

Ref. Number: W18000072919

We have received your document for INTELESYS and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please add corporate suffix ending (inc., corp, co) to alternative name.,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 618A00016594

Octavia L Simmons Regulatory Specialist III

11.11.11 C-11.17.610

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Spectrum	PERVICES, INC.
Name of corpo	ration - must include suffix
Dear Sir or Madam:	
	on for Authorization to Transact Business in Florida," d Standing" and check are submitted to register the business in Florida.
Please return all correspondence concerning this	matter to the following:
JEROME JO	20000
JEROME JOI	ne of Person
Spectrum S	ne of Person OFRUICES N/Company
Firm	n/Company
2621 CAT	Address Fl. 34232 State and Zip code ECTRUMSERVICES USA-COM used for future annual report notification)
	Address
SARASOTA	, Fl. 34232
City	tate and Zip code
JERRY@ SA	ECTRUMSERVICESUSA. COM
E-mail address: (to/be	used for future annual report notification)
For further information concerning this matter, p	ease call:
VERRY JOHNSON at (14L, 3 21-3192
Name of Person Are	a Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, FL 32314
Tallahassee, FL 32301	t anattassee, i L 32314
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Statu	

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.	Speetrum SERVICES, INC.				
	(Enter name of corporation; must include "INCORPORATEDY "COMPANY," "CORPORATION,"				
<u> </u>	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
Þρę	Chum Inteles is Constant and adopted for the purpose of transacting business in Florida)				
/	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
2.	(State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (FEI number, if applicable)				
4.	Date of incorporation) (Date of duration, if other than perpetual)				
	(Date of incorporation) (Date of duration, if other than perpetual)				
6.	JANUARY 2007				
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	*			
-		cota F			
1.	2621 Cattleman Road, Suite 705, Sara (Principal office address)	21/222			
	表示 2 一	39232			
	(Current mailing address, if different)	ė			
S.	. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)				
O.	Traine and street address of Fiorida registered agent. (1.0. box No Tacceptable)				
	Name: Name: Name: W. Jenome W.				
C	Name: Att JEROME W. Johnson Strice Address: 2621 CAHLEMAN ROAD				
	SARASOTA, Florida 34232				
	(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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: JEROME Johnson
Address: 401 North Point RD., Unit 304
Chairman: JEROME Johnson Address: 401 Nonth Point RD., Unit 304 SALASOFA, Florida 34229
Vice Chairman: SETTERSON WEEKLEY
Address: 1590 LAZY RIVER LANG
Address: 1590 LAZY RIVER LANG ATLANTA, GA. 30350
9
Director:
Address:
Director:
Address:
B. OFFICERS
President: JEROAJE JOHNSON
President: JEROME Johnson Address: 401 North Point RD., Unit 304, Osprey, F1 34228
Vice President:
Address:
Secretary: Jr. HERSON WEEKLEY
Secretary: JE HERSON WEEKLEY Address: 1590 LAZY RIVER LANE, ATLANTA, GA 30356
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. Steve W. John
Signature of Director or Officer
The officer of 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

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

Control Number: J603940

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Robyn A. Crittenden, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

SPECTRUM SERVICES, INC

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official-Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 16453934
Date Inc/Auth/Filed: 01/07/1985
Jurisdiction : Georgia
Print Date : 01/14/2019

Form Number : 211



Rolyn Q. Critender