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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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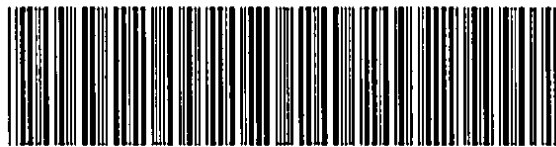
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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318 4/15/19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AEROPATH, INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

TED L. FERRELLA
Name of Person

AEROPATH, INC.
Firm/Company

2901 W. CYPRESS CREEK ROAD SUITE 120
Address

FORT LAUDERDALE, FL 33309-1732
City/State and Zip code

TEDPERRELLA@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TED FERRELLA at (954) 383-6201 (CELL)
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified 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.

1. AEROPATH, 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. DELAWARE

(State or country under the law of which it is incorporated)

3. 61-1893570

(FEI number, if applicable)

4. 6/20/2018

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. _____

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

7. 2901 W. CYPRESS CREEK ROAD STE 120 FORT LAUDERDALE FL 33309-1732

(Principal office address)

(Current mailing address, if different)

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

Name: TED PERRELLA

Office Address: 2901 W CYPRESS CREEK RD STE 120

FORT LAUDERDALE

(City)

Florida 33309-1732

(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.

Ted Perrella

(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.

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

A. DIRECTORS

Chairman: RICHARD HERBST

Address: 2401 W. CYPRESS CREEK ROAD STE 120
FORT LAUDERDALE, FL 33309-1732

Vice Chairman: TED L. PERRELLA

Address: 2901 W. CYPRESS CREEK ROAD, STE 120
FORT LAUDERDALE, FL 33309-1732

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: RICHARD HERBST

Address: 2901 W. CYPRESS CREEK ROAD STE 120
FORT LAUDERDALE, FL 33309-1732

Vice President: _____

Address: _____

Secretary: TED L. PERRELLA

Address: 2901 W. CYPRESS CREEK ROAD STE 120 FTL FL 33309

Treasurer: TED L. PERRELLA

Address: NITTO

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

12. _____

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. Ted L. Perrella, Sec/Treas TED L. PERRELLA

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

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ALLAHABAD, FL 33309

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AEROPATH, 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 SIXTEENTH DAY OF JANUARY, A.D. 2019.



6940750 8300

SR# 20190222952

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202089756

Date: 01-16-19