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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	MAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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JUN 0 5 2019

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Required Support, Inc.	
	e of corporation - must include suffix
Dear Sir or Madam:	
	Corporation for Authorization to Transact Business in Florida," ate of Good Standing" and check are submitted to register the transact business in Florida.
Please return all correspondence conc	rning this matter to the following:
Ronald T. Cole	
	Name of Person
Required Support, Inc.	
	Firm/Company
P.O. Box 421288	
	Address
San Diego, CA 92142-1288	
	City/State and Zip code
LawOfficeofRonaldTCole@gmail.com	~>
E-mail add	ess: (to be used for future annual report notification)
For further information concerning th	ess: (to be used for future annual report notification)
Ronald T. Cole	at (858) 349-6980 P
Name of Person	Area Code Daytime Telephone Number
STREET/COURIER ADDI 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	mount:
☐ \$70.00 Filing Fee ☐ \$78.75 F Certific	ling Fee & Status Status Status Certified Copy S87.50 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.

Required Suppo	ort, Inc.				
	orporation; must include "INCORPOR orp," "Inc." "Co," or "Corp.")	ATED." "COMPANY	'," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corpora	te name adopted for the	e purpose of transacting bu	siness in Florida)	
. Wyoming		3. 83-3442003			
(State or country	y under the law of which it is incorpor	ated)	(FEI number, if applies	able)	
_{1.} Feb 1, 2019		5			
	(Date of incorporation)		(Date of duration, if other than perpetual)		
6					
	(Date first transacted by (SEE SECTIONS 607.1501)				
7. 2232 Dell Range	Blvd., Cheyenne, WY 82009	1.5			
		(Principal office addre	2SS)		
P.O. Box 421288	3 San Diego, CA 92142-1288				
	(Curre	nt mailing address, if c	itterent)		
8. Name and stree	et address of Florida registered age	 nt: (P.O. Box <u>NOT</u> 	_acceptable)		
Name:	Registered Agents Inc.			iuć	
Office Address:	7901 4th St N STE 300			Para HAY	
	St. Petersburg	Florid	a 33702	22	
	(City)		(Zip code)	Р Н	
				5.	
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to acco application, I hereby accept the a comply with the provisions of all st familiar with and accept the oblig	appointment as regis atutes relative to the	tered agent and agree t proper and complete p	orporation at the place of act in this capacity.	
		Registered A	gents Inc.		
	Bell Name	Bill Havre	- Assistant Sec	retary	
_	(Re	gistered agent's signati	ле)	_	

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: Joseph Liberty	
Address: C/O Bill Griffin 2232 Dell Range Blvd. Ste 245	
Cheyenne, WY 82009	
Vice Chairman: Dennis Hottenstein	
Address: C/O Bill Griffin 2232 Dell Range Blvd. Ste 245	
Cheyenne, WY 82009	
Director:	
Address:	
	
Director:	
Address:	
B. OFFICERS	
President: Joe Liberty	
Address: C/O Bill Griffin 2232 Dell Range Blvd. Ste 245	
Cheyenne, WY 82009	
Vice President: Dennis Hottenstein	-:-
Address: C/O Bill Griffin 2232 Dell Range Blvd. Ste 245	
Cheyenne, WY 82009	
Secretary: Ronald T. Cole	
Address: P.O. Box 421288, San Diego, CA 92142-1288	
Treasurer:	
Address:	
NOTE: If necessary, you may attageh an addendum to the application listing additional officers and/or directors.	
12. And J. M.	
Signature of Director or Officer	har-!-
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated are true and that he or she is aware that false information submitted in a document to the Department of State con	
a third degree felony as provided for in s.817.155, F.S.	
Ronald T. Cole, Secretary (Typed or printed name and capacity of person signing application)	

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Required Support, Inc.

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **February 1**, **2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2019-000839681**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 18th day of May, 2019 at 2:17 PM. This certificate is assigned 031140922.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.