

F19000003123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

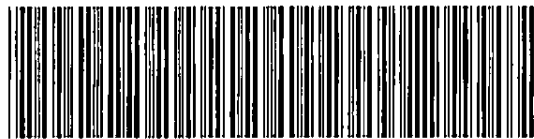
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: July 09, 2019

Account#: I20000000088

Name: KEN HOWELL

Reference #: 1104493

Entity Name: NEWSIGHT REALITY, INC.

☒ ~~Articles of Incorporation/Authorization to Transact Business~~

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other GOOD STANDING UPON FILING

ISSUES? CALL
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518-213-0738

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Authorized Amount: \$78.75

Signature:



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TALLAHASSEE, FL 32301
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Account#: 120000000088

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□ Conversion

☐ Merger☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other

**** GOOD STANDING UPON FILING**

Authorized Amount: **\$78.75**

Signature:

COVER LETTER

TO: Registration Section
Division of Corporations
NewSight Reality, Inc.

SUBJECT: _____
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:
Diane Munn

Name of Person
NewSight Reality, Inc.

Firm/Company
4502 Starkey Road, Suite 106

Address
Roanoke, VA 24018

City/State and Zip code
dmunn@newsightreality.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane Munn 540 904-7646

Name of Person at () 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.*

NewSight Reality, Inc.

1. _____
(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)
Delaware 82-5420483

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
05/02/2018

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
05/01/2019

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
4502 Starkey Road, Suite 106, Roanoke, VA 24018

7. _____
(Principal office address)

(Current mailing address, if different)

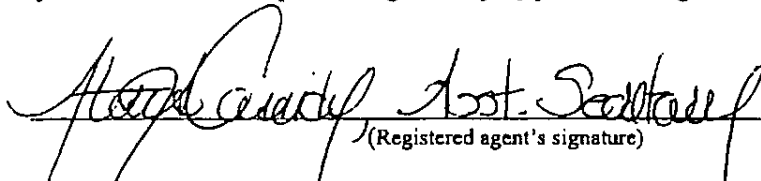
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
COGENCY GLOBAL INC.

Name: _____
115 North Calhoun Street, #4

Office Address: _____
Tallahassee 32301
_____, Florida _____
(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: Ronald Blum ✓
3280 North Side Pkwy NW, Apt 407
Address: Atlanta, GA 30327

Director: Joe Gira ✓
Vice Chairman: 905 Claymark Drive
Address: St. Louis, MO 63131

Director: Brendan Sheil ✓
6150 NW Timberidge Drive
Address: Parkville, MO 64152

Director: Philip Garfinkle ✓
1031 1st Street S, Apt 604
Address: Jacksonville Beach, FL 32250

B. OFFICERS

President: Philip Garfinkle ✓
1031 1st Street S, Apt 604
Address: Jacksonville Beach, FL 32250

Vice President: _____
Address: _____

Secretary: Diane Munn ✓
4502 Starkey Road, Suite 106, Roanoke, VA 24018
Address: _____

Treasurer: _____
Address: _____

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

12. Diane J. Munn
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. Diane Munn, Corporate Secretary
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "NEWSIGHT REALITY, 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 FIFTEENTH DAY OF JUNE, A.D. 2019.

2019 JUL -9 PM 4:41
TALLAHASSEE, FLORIDA



6868707 8300

SR# 20195332515

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

A handwritten signature of Jeffrey W. Bullock in black ink, 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: 203034068

Date: 06-15-19