F19000003865

(Requestor's Name)						
(Address)						
(Address)						
(Cid	ty/State/Zip/Phone	; #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						





000333129430

08/15/13---01008---004 ••76.75

2018 AUG 15 PH 4: 38

AUG 20 2019 M. SOLOMON

COVER LETTER

_	ration Section on of Corporations				
SUBJECT:	MergePower Inc				
		Name of corpora	tion	- must include suffix	
Dear Sir or Ma	dam:				
"Certificate of		rtificate of Good	Stand	Jing" and check are sub	ct Business in Florida." omitted to register the
Please return a	Il correspondence c	concerning this m	atter	to the following:	
Eric Ridenour					
		Name	of P	erson	
MergePower Inc					
		Firm/0	Comp	pany	
6271 St Augus	tine Rd 24-1443				
		A	ddres	SS	
Jacksonville, F	L 32217				
		City/Sta	ite an	d Zip code	
eric@mergepov					
	E-mail	address: (to be us	sed to	or future annual report	notification)
For further info	ormation concernin	g this matter, plea	ise ci	ill:	
Eric Ridenour		at (_678		, 778-7316	
	of Person	Area		_'	hone 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 c	heck for the follow	ing amount:			
□ \$70.00 Filii		75 Filing Fee & ificate of Status	◻	\$78.75 Filing Fee & 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.

1. MergePower Inc					
	orporation; must include "INCORPORATI orp." "Inc," "Co," or "Corp.")	€D,"	"COMPANY," "CORPORATION,"		
(If name unavaila	ible in Florida, enter alternate corporate na	— me ac	dopted for the purpose of transacting bus	iness in Florida)	
2. Georgia		3. 20-3562143			
(State or countr	(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4. 10-03-2005		5.			
(Date	(Date of incorporation)		(Date of duration, if other than	other than perpetual)	
6					
- 2070 Basabisas ((SEE SECTIONS 607.1501 & 60		Florida, if prior to registration) 2, F.S., to determine penalty liability)		
7. 2870 Peachtree P	Rd #915-8660, Atlanta. GA 30305 (Pri	ncipa	Loffice address)		
	(Current mailing address, if different)				
8. Name and <u>stree</u>	<u>et address</u> of Florida registered agent: ((P.O.	Box NOT acceptable)	10 5	
Name:	Registered Agents Inc.			· "'];	
Office Address:	7901 4th St N STE 300				
	St. Petersburg		Florida <u>33702</u>	Ç.	
	(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 Agents Inc.

Bill Havre - Assistant Secretary

(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: Eric Ridenour Address: 6271 St Augustine Rd 24-1143, Jacksonville, FL 32217 Vice Chairman: Address: __ Address: Address: B. OFFICERS President: Enc Ridenour Address: 6271 St Augustine Rd 24-1143, Jacksonville, FL 32217 Vice President: Address: _ Secretary: Eric Ridenour Address: 6271 St Augustine Rd 24-1143, Jacksonville, FL 32217 Treasurer: Eric Ridenour Address: 6271 St Augustine Rd 24-1143, Jacksonville, FL 32217 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Eric Ridenour

Control Number: 0567354

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, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

MERGEPOWER, 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 : 17483426 Date Inc/Auth/Filed: 10/03/2005 Jurisdiction : Georgia Print Date : 08/09/2019

Form Number : 211



Brad Rafforagesger

Brad Raffensperger Secretary of State