

F19000000393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W19000077023

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SEAL OF THE STATE
TALLAHASSEE, FLORIDA

Y SCOTT

AUG 29 2019

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2019

TOWAN RUSH
1665 PINELLAS POINT DR S
ST. PETERSBURG, FL 33712

SUBJECT: HIGHEND TECHNICAL SERVICES INC.
Ref. Number: W19000077023

We have received your document for HIGHEND TECHNICAL SERVICES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Yvette Scott
Document Specialist II

Letter Number: 219A00017118

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HIGHEND TECHNICAL SERVICES 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:

TOWAN RUSH

Name of Person

Firm/Company

1665 PINELLAS POINT DR S

Address

ST PETERSBURG, FL 33712

City/State and Zip code

corptowanrush@gmail.com

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

For further information concerning this matter, please call:

TOWAN RUSH

727

422-8697

at ()

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Chfton 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. HIGHEND TECHNICAL SERVICES 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. HAWAII 3. 84-2658776
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3/21/2017 5. PERPETUAL
(Date of incorporation) (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. 1665 PINELLAS POINT DR S ST PETERSBURG, FL 33712
(Principal office address)

_____ (Current mailing address, if different)

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

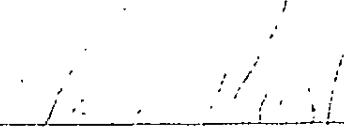
Name: Towam Rush

Office Address: 1665 PINELLAS POINT DR S

ST PETERSBURG , Florida 33712
(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

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Towan Rush

Address: 1665 PINELLAS POINT DR S ST PETERSBURG, FL 33712

Director: _____

Address: _____

B. OFFICERS

President: Towan Rush

Address: 1665 PINELLAS POINT DR S ST PETERSBURG, FL 33712

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: Towan Rush

Address: 1665 PINELLAS POINT DR S ST PETERSBURG, FL 33712

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

12. _____

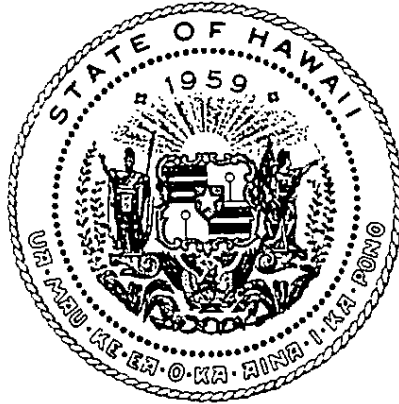
Signature of Director or Officer

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. TOWAN RUSH PRESIDENT

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

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Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

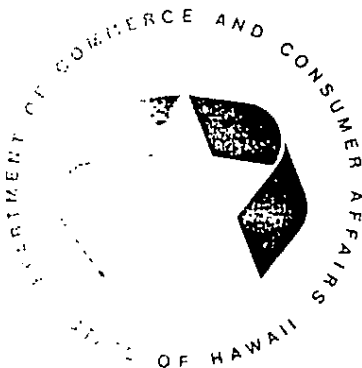
HIGHEND TECHNICAL SERVICES INC.

was incorporated under the laws of Hawaii on 03/21/2017 ; and that it is an existing corporation in good standing, and is duly authorized to transact business.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: August 08, 2019

Director of Commerce and Consumer Affairs



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