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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| . * |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| i. |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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2019 SEP 12 PH 2: 00

RESUBMIT

Please give original submission date as file date.

19 SEP 12 PH 12: 50

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : I2000000195 | | | | |
|---|--|--|--|--|
| REFERENCE : 915016 4323109 | | | | |
| AUTHORIZATION : | | | | |
| COST LIMIT : \$ 70.00 | | | | |
| ORDER DATE : September 12, 2019 | | | | |
| ORDER TIME : 12:50 PM | | | | |
| ORDER NO. : 915016-020 | | | | |
| CUSTOMER NO: 4323109 | | | | |
| | | | | |
| FOREIGN FILINGS | | | | |
| NAME: SENSATEK PROPULSION TECHNOLOGY, INC. | | | | |
| XXXX QUALIFICATION (TYPE: CO) | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING | | | | |
| CONTACT PERSON: Roxanne Turner EXT# 62969 | | | | |
| EXAMINER: | | | | |
| | | | | |

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.

| i. | Sensatek Propulsion Techn | nology, Inc. | | | | |
|--------------------|--|--|----------------------------------|----------------------|-----------|--|
| | orporation; must include "INCORPC orp," "Inc," "Co." or "Corp.") | DRATED," "COM | MPANY." "CORPORATION | | | |
| (If name unavaila | ble in Florida, enter alternate corpo | rate name adopted | d for the purpose of transacting | g business in Fl | lorida) | |
| 2. | Delaware | 3. | | | | |
| (State or country | under the law of which it is incorpo | orated) | (FEI number, if app | olicable) | | |
| 4. Sep | tember 12, 2019 | | Perpetual | | | |
| The corpora | e of Incorporation) ation was previously an active Flori er 12, 2019, and is applying for auth | da corporation w orization to trans | sact business in Florida. | • | n | |
| 7600 S. Clyd | • | 1 & 607.1502, F.S na Beach, FL | | y) | | |
| | | (Principal offic | | | <u></u> | |
| 600 S. Clyd | e Morris Blvd., #204, Dayto | | | ٠٠٠ شير | <u>လူ</u> | |
| | (Cur | rent mailing addr | ess. if different) | 27 F | P 12 | |
| 8. Name and street | t address of Florida registered ag | gent: (P.O. Box | NOT acceptable) | | PH | |
| Name: | Reamonn Soto | | | 11 12 22 23 | PH 12: 51 | |
| Office Address: | 288 Gala Circle | <u>_</u> | | 35° | رپ | |
| | Daytona Beach | | Florida 32114 | | | |
| | (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, 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.

| Χ | Ren 50 | | |
|---|--------------|--------------------------------|--|
| | Reamonn Soto | (Registered agent's signature) | |

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdictic under the law of which it is incorporated.

| 11. Names and business addresses of officers and/or directors: | | Fig |
|--|--|----------|
| A. DIRECT | CORS | 19 SFD |
| Chairman: | Reamonn Soto | 12 PM |
| Address: | 600 S. Clyde Morris Blvd., #204, Daytona Beach, FL 32114 | |
| | | 11 KU(|
| Vice Chairma | n: | ···· |
| Address: | | |
| | | |
| Director: | | |
| Address: | • | |
| | | <u>.</u> |
| Director: | | |
| Address: | | |
| | | |
| B. OFFICE | | |
| | | |
| Address: | 600 S. Clyde Morris Blvd., #204, Daytona Beach, FL 32114 | |
| | | |
| | | |
| Address: | | |
| | Azryana Soto | |
| Address: | 600 S. Clyde Morris Blvd., #204, Daytona Beach, FL 32114 | |
| | Reamonn Soto | |
| | 600 S. Clyde Morris Blyd., #204, Daytona Beach, FL 32114 | |
| | ecessary, you may attach an addendum to the application listing additional offic | |
| (12. <u>R</u> | and the state of t | |
| are true and t | Signature of Director or Officer r director signing this document (and who is listed in number 11 above) affirms hat he or she is aware that false information submitted in a document to the Dependence felony as provided for in s.817.155, F.S. | |
| 13. | Reamonn Soto, President | |
| | (Typed or printed name and capacity of person signing application) | |

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SENSATEK PROPULSION TECHNOLOGY, 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 TWELFTH DAY OF SEPTEMBER,

A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SENSATEK

PROPULSION TECHNOLOGY, INC." WAS INCORPORATED ON THE TWELFTH DAY OF

SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.





Authentication: 203581591

Date: 09-12-19

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