

WF19000000482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

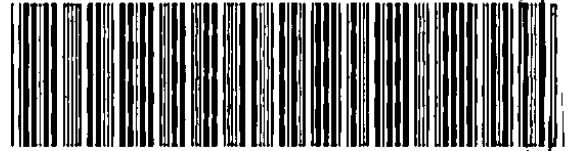
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

*name VA
W19-80347*

Office Use Only



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 3, 2019

RONALD JOSEPH
1071 NW 31ST AVENUE, UNIT B-4
POMPANO BEACH, FL 33069

SUBJECT: CTA SOLUTIONS INC
Ref. Number: W19000080347

We have received your document for CTA SOLUTIONS INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is P18000048953.

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.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 819A00018096

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CTA Solutions 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:

Ronald Joseph

Name of Person

CTA Solutions Inc

Firm/Company

1071 NW 31st Avenue, Unit B-4

Address

Pompano Beach, FL 33069

City/State and Zip code

roun_f@hotmail.com

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

For further information concerning this matter, please call:

Roun Francois

407 749-3850
at (_____) _____

Name of Person

Area Code

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:

- | | | | |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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. CTA Solutions Inc
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Consultant & Accounting Solution, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Saint Lucia 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. January 28, 2016 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. Has not yet transacted business in Florida
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. General Post Office, Castries, St. Lucia
(Principal office address)
- Same as #7
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Roun Francois
- Office Address: 1071 NW 31st Avenue, Unit B-4
- Pompano Beach, Florida 33069
(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.

Roun Francois

(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.

FILED

19 OCT 23 PM 2:00

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Ronald Joseph

Address: 1071 NW 31st Avenue, Unit B-4
Pompano Beach, FL 33069

Vice President: _____

Address: _____

Secretary: Roun Francois

Address: 1071 NW 31st Avenue, Unit B-4, Pompano Beach, FL 33069

Treasurer: _____

Address: _____

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

12. Roun Francois *Roun Francois*

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. Roun Francois, Secretary

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

FILED
19 OCT 23 PM 2:00
CLERK OF THE COURT
STATE OF FLORIDA



SAINT LUCIA

COMPANIES ACT

Chapter 13.01 of the Revised Laws of Saint Lucia

CTA SOLUTIONS INC.

2016/C029

Company Name

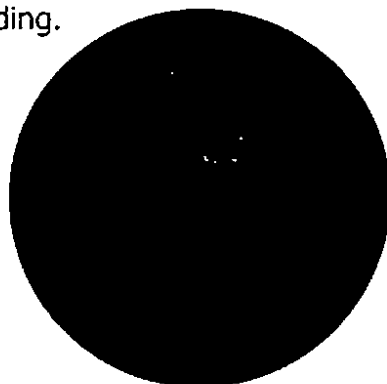
Company No.

I, **KOZEL CREESE**, Acting Registrar of Companies and Intellectual Property in the State of Saint Lucia:

HEREBY CERTIFY THAT:

1. The above company was duly incorporated under the Companies Act, Chapter 13.01 of the Revised Laws of Saint Lucia, on the 28th day of January, 2016 as Company No. 2016/C029.
2. No proceedings have been instituted to strike the name of the company off the Register and the company is therefore a validly existing company in the Register of Companies kept by the Registry of Companies and Intellectual Property.
3. The company has filed annual returns up to the 31st day of December, 2018 pursuant to section 194 of the Companies Act, Chapter 13.01.
4. The company has not filed articles of amalgamation and is not in the process of being wound up and dissolved.
5. As far as the office of the Registrar is aware, no receiver or manager of the company's property has been appointed.

As far as evidenced by the documents filed with the Registrar, the above company is in good standing.



**GIVEN UNDER MY HAND at Castries
this 18th day of June, 2019**


.....
**Acting Registrar of Companies
and Intellectual Property**

*Note: This certificate only pertains to information contained on file as at the date of the certificate.
This certificate is valid until 31st March 2020.*