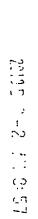


| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to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

Office Use Only



600337502456



T GLASS DEC 0 3 2019

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 070070 8267806

AUTHORIZATION : Special man

COST LIMIT : \$ 70.00

ORDER DATE : November 27, 2019

ORDER TIME : 9:03 AM

ORDER NO. : 070070-005

CUSTOMER NO: 8267806

FOREIGN FILINGS

NAME: JUSTFOIA, 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: Amanda Robinson -- EXT# 62968

EXAMINER:

7819 - 7 - 2 - 7 - 61 5

COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|--|-----------------------|--|---------------|
| JustFOIA. Inc. SUBJECT: | | | |
| | ame of corporation - | must include suffix | <u>-</u> _ |
| Dear Sir or Madam: | | | |
| | ficate of Good Stand | authorization to Transact Business in Fing" and check are submitted to regists in Florida. | |
| Please return all correspondence con James Dandy | cerning this matter t | to the following: | |
| | Name of Po | erson | |
| JustFOIA, Inc. | | | |
| | Firm/Comp | any | |
| 1958 Commonwealth Ln | | | |
| · | Addres | S | |
| Tallahassee, FL 32303 | | | |
| | City/State and | d Zip code | |
| jdandy@meeinnovations.com | · | · | 23 |
| E-mail ad | dress: (to be used fo | r future annual report notification) | · |
| For further information concerning the | his matter, please ca | 11: | 1 |
| James Dandy | 850 | 701.0725 | |
| Name of Person | at (Area Code | Daytime Telephone Number | 는 57 - |
| STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, FL 32301 | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | |
| Enclosed is a check for the following | g amount: | | |
| □ \$70.00 Filing Fee □ \$78.75 | Filing Fee & 🔲 | \$78.75 Filing Fee & S87.50 Fil Certified Copy Certificat Certified | e of Status & |

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.

| | · | • | ed for the purpose of transacting bu | smess in Fiorida) |
|---------------------------------|---|----------------------|--|-------------------|
| Delaware | 3 | 84-3633099 3 | | |
| (State or country | | | (FEI number, if applicable) | |
| | of incorporation) | 5 | | |
| (Date | (Date of incorporation) | | (Date of duration, if other than perpetual) | |
| | | | | |
| | (Date first transacted business | | | |
| | (SEE SECTIONS 607.1501 & 607. | .1502. F. | S., to determine penalty liability) | |
| 1958 Commonwe | ealth Ln, Tallahassee FL 32303 | | | |
| | (Prine | cinal offi | ce address) | |
| | (Tine | ipai oni | ee address) | |
| | | 11 | 10 11:00 A | |
| | (Current mai | ling addi | ress, if different) | |
| | | | | |
| | | | | £3 |
| Name and stree | et address of Florida registered agent: (P | ² .O. Box | x <u>NOT</u> acceptable) | 50 |
| | et address of Florida registered agent: (P Corporation Service Company | ² .O. Box | x <u>NOT</u> acceptable) | 2019 0 |
| . Name and <u>stre</u> Name: | Corporation Service Company | .O. Box | x <u>NOT</u> acceptable) | 7.5 |
| Name: | Corporation Service Company 1201 Hays Street | | x <u>NOT</u> acceptable) | 7.5 C7 |
| Name: | Corporation Service Company 1201 Hays Street | | | |
| | Corporation Service Company 1201 Hays Street | | x <u>NOT</u> acceptable) Florida (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.



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:

| | Martin Sarafa | |
|------------|--|----------------------|
| | 1958 Commonwealth Ln, Tallahassee, FL 32303 | |
| | | |
| Vice Chai | Tony Trevino | |
| | same | |
| - | | |
| Director: | Donald Barstow | |
| Address: | same | |
| | | |
| Director: | | |
| Address: | | |
| B. OFF | ICERS | |
| | Donald Barstow | |
| | same | |
| | | |
| Vice Pres | ident: | <u> </u> |
| Address: | | |
| | | |
| Secretary: | | 3) (n |
| Address: | same | 57 |
| Treasurer | James Dandy | |
| Address: | same | |
| | If necessary, you may attach an addendum to the application listing additional office | rs and/or directors. |
| are true a | Signature of Director or Officer error director signing this document (and who is listed in number 11 above) affirms that he or she is aware that false information submitted in a document to the Department of t | |
| 13 | es Dandy | |
| | (Typed or printed name and capacity of person signing application) | |



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

DELAWARE, DO HEREBY CERTIFY "JUSTFOIA, 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 TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JUSTFOIA, INC."

WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 204103156

Date: 11-27-19

7670914 8300 SR# 20198348368