Faccomin

(R	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		!
	Office Use Onl	v •



400337895264

15,13,19-41553-415 **75,59

2619 DEC 13 PM 1: 46



COVER LETTER

	tration Se- ion of Cor					
SUBJECT:		hnologies Inc.				
SUBJECT:		Name	of corporat	tion -	- must include suffix	
Dear Sir or M	adam;					: 23
"Certificate of	Existenc		c of Good S	Stand		et Business in Florida;" mitted to register the
Please return : Zahra Hamadi	all corresp	ondence concer	ning this ma	atter 1	to the following:	3 PH
Heila Technolo	ogies Inc.		Name	of P	erson	PH 1: 46
195 Alewife D	eoole Duelen	my Suite 210	Firm/C	Comp	any	7
185 Alewife Bi	TOOK PAIKW					
Cambridge, Ma	A 02138		Ac	idres	ss	
Zhamadi@axel	liapartners.	com	City/Stat	te an	d Zip code	
		E-mail addres	ss: (to be us	ed fo	r future annual report r	otification)
For further inf	formation	concerning this	matter, plca	se ca	11 :	
Zahra Hamadi			617 at (576-2005	
Namo	of Person	n	Area	Code	Daytime Telepl	none Number
Regist Divisi Cliftor 2661 I Tallah	tration Secon of Cor on of Cor n Building Executive nassee, FL	porations B Center Circle			MAILING AS Registration Se Division of Co P.O. Box 6327 Tallahassee, F	ection rporations
≡ \$ 70,00 Fifi	ng F ee	\$78.75 Filis Certificate		0	\$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.

(Enter name of c	orporation; must include "TNCORPORATE orp," "Inc," "Co," or "Corp.")	D,'	"COMPANY," "CORPORATION,"		
Delaware 2.	·	ne .	adopted for the purpose of transacting busines 475024305	s in Florid	a)
12/27/2017	y under the law of which it is incorporated)	5.	(FEI number, if applicable) Perpetual	T A	201
(Date	of incorporation)		(Date of duration, if other than perp	ctual)-	20 19 DEC
444 Somerville A			a Florida, if prior to registration) 102, F.S., to determine penalty liability)	SSEE	- 13 PM
185 Alewife Bro	(Prin ok Parkway, Suite 210 Cambridge, MA 021	-	al office address)	Löklö	- 1: 16
	(Current ma	lin	g address, if different)		
8. Name and stree	et address of Florida registered agent: (I	P.C	D. Box <u>NOT</u> acceptable)		
Office Address:	1200 South Pine Island Road				
	Plantation (City)	_	, Florida 33324 (Zip code)		
9. Registered age Having been nam	ent's acceptance:	rvi	ce of process for the above stated corpor	atlon at t	he pla

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.

MARGARET E. ROUTZAHN

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 Francisco Morocz 444 Somerville Ave Address: _ Somerville, MA 02143 Vice Chairman: ____ Address: ____ Francisco Morocz Director: 444 Somerville Ave Address: _ Somerville, MA 02143 Director: __ B. OFFICERS Francisco Morocz President: 444 Somerville Ave Address: _ Somerville, MA 02143 Francisco Morocz Vice President: 444 Somerville Ave Address: Somerville, MA 02143 Francisco Morocz Secretary: 444 Somerville Ave Somerville, MA 02143 Address: _ Francisco Morocz Treasurer: 444 Somerville Ave Somerville, MA 02143 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.

President - Francisco Morocz



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

DELAWARE, DO HEREBY CERTIFY "HEILA TECHNOLOGIES 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-SECOND DAY OF NOVEMBER, A.D.

2019.

2019 DEC 13 PM 1: 47

Authentication: 204072893

Date: 11-22-19

6682124 8300

SR# 20198249494