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COVER LETTER

-	gistration Section rision of Corporations		
SUBJECT	InspectionGo Inc.		
SCEOLC.		on - must include suffix	
Dear Sir or	Madam:		
"Certificate		r Authorization to Transact Business in Flo anding" and check are submitted to register sess in Florida.	
Please retur	n all correspondence concerning this matt	er to the following:	
Ashley Davi	dson		
	Name o	f Person	
InspectionG	o Inc.		
	Firm/Co	mpany	
1010 Pennsy	Ivania Avenue		
	Add	ress	
Tyrone, PA	16686		202
	City/State	and Zip code	t
a.davidson@	a.davidson@inspectiongo.com		: <u>2</u> .
	E-mail address: (to be used	for future annual report notification)	4.
For further information concerning this matter, please call:			
Ashley Davi	idson 814 at (682-7530	
Na	ame of Person Area Co		_
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	a check for the following amount: check payable to: FLORIDA DEPARTMENTIAL STREET	FT OF STATE □ \$78.75 Filing Fee & □ \$87.50 Filing Certified Copy Certified Copy Certified Copy	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.

nspectionGo Inc	2.			
		COMPANY," "CORPORATION,"		
f name unavaila	able in Florida, enter alternate corporate name add	pied for the purpose of transacting bus	siness in Florida)	
Delaware	3.			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
7/25/2019	5			
(Date of incorporation) (Date of duration, if oth			perpetual)	
IIO Pennsylvani	(SEE SECTIONS 607.1501 & 607.1502			
		street address)		
			20	
	(Current mailing a	ddress, if different)	<u> </u>	
Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	:2 #	
Name:	InCorp Services, Inc.	_	**************************************	
ice Address:	17888 67th Court North			
	Loxahatchee	Florida 33470	<u>n</u>	
	(City)	(Zip code)		
	inter name of collect," "Co.,"	Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") If name unavailable in Florida, enter alternate corporate name add Delaware (State or country under the law of which it is incorporated) (Date of incorporation) (Date first transacted business in Florida Sections 607.1501 & 607.1502 (Date Sections 607.1501 & 607.1502 (Principal office) (Current mailing a Name and street address of Florida registered agent: (P.O. E. Name: InCorp Services, Inc. 17888 67th Court North Loxahatchee	inter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," Inc.," "Co.," "Corp.," "lnc.," "Co.," or "Corp.") If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting bus Delaware (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date of duration, if other than place of transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 100 Pennsylvania Avenue Tyronc, PA 16686 (Principal office street address) (Current mailing address, if different) Name: InCorp Services, Inc. 17888 67th Court North Loxabatchee Florida 33470	

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.

Karen Gibson on behalf of InCorp Services, Inc.

(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.

A. DIRECTORS				
l_Chainnan	Name:	[] Chairman	Name: William Russell	
□Vice Chairman	Address:	∐Vice Chairman	Address:	
1 Director	2490 Edgewood Drive	- ₽ Ðirector	333 Saddle Ridge Road	
-til resident	Tyrone, PA 16686	□President	Port Matilda, PA 16870	
□Vice President		□Vice President		<u> </u>
□Secretary	Treasurer	[]Secretary	Z Treasurer	
□Other	Other	□ Other	Other	
□Chairman	Name: Chad Hett	□Chairman	Name: Mark Wise	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	46 Cadencia St	Director	1031 Imperial Drive	
□President	Rancho Mission, CA 92694	□ President	Morgantown, WV 2650	3
□Vice President		Vice President		
Secretary	Treasurer	□Secretary	□Treas	urer
□Other	Other	□Other		
				2070
□ Chairman	Name:	☐ Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	 2 <u></u>
□Director		□Director		
∏President		∐President	<u></u>	
□Vice President		□Vice President		<u>ੰਧ</u>
☐ Secretary	Treasurer	□ Secretary	□Treas	urer
LiOther	[] Other	□Other	[]Other	·
individuals may be 12 The officer or dire	Use an attachment to report more than six (6). The added to the index when tiling your Florida Dep Signature of Director signing this document (and who is listed in a alse information submitted in a document to the E	artment of State Annual Rector or Officer umber 11 above) affirms the	eport form. nat the facts stated herein a	re true and that he or
William Rus	ssell			<u></u>





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

DELAWARE, DO HEREBY CERTIFY "INSPECTIONGO 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 NINTH DAY OF JANUARY, A.D. 2020.

2023 : 24 FTH: 52



Authentication: 202158674

Date: 01-09-20