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COVER LETTER

	stration Section of Cor						
SUBJECT:	Comtrex	Systems Corporal	tion				
зовятет.		Name o	of corporation	n - mus	t include suffix		
Dear Sir or M	tadam:						
"Certificate o	f Existence		of Good Stai	nding"	and check are sub	ct Business in Flo omitted to register	
Please return	all corresp	ondence concerni	ng this matte	r to the	following:		
Jill Barbera							
·	,		Name of	Perso	1		
Comtrex Syst	tems Corpo	oration					
			Firm/Cor	npany			
101 B Foster	Road						
		·	Addr	ess			
Moorestown,	NJ 08057						
			City/State a	and Zip	code		
jill.barbera@d	comtrex.co	m					
		E-mail address	: (to be used	for fut	are annual report i	notification)	<i>~</i> 3
For further in	formation	concerning this m	atter, please	call:			2020 JEN 22
Richard Ham	mond		407 at (53	9-1240		122
Nam	e of Persor		Area Coo		Daytime Telep	hone Number	PH 5: 47
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				
	neck payable	the following amo e to: FLORIDA DF \$78.75 Filing Certificate o	EPARTMENT g Fee & [□ \$78.	TATE 75 Filing Fee & itied Copy	☐ \$87.50 Filio Certificate Certified C	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.

(Enter name of c	orporation: must include "INCORPORATED," orporation; must include "INCORPORATED," orp."	COMPANY." "CORPORATION."		
			- 1N - 13 ×	
(If name unavail: DE	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting busine 2-2353604	ss in Florida)	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
10/12/1988				
(Date of incorporation)		(Date of duration, if other than perp	petual)	
2/1/2019				
101 B Foster Ro	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502) pad, Moorestown, NJ 08057			
•	(Principal office	street address)	2020	
	(Current mailing a	address, if different)	2070 JAN 22	
Name and stree	et address of Florida registered agent: (P.O. l	Box NOT acceptable)	P	
Name:	Richard Hammond			
Office Address:	206 W Sybelia Avenue		5: 47	
	Maitland	32751 . Florida		
	(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.

(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			D V (Fig. 1)	11		
□Chairman	Stuart McLean Name:	□Chairman	Name: Richard Hammond			
□Vice Chairman	1 Tanfield Address:	□Vice Chairman	Address:			
□Director	Edinburgh EH3 5DA UK	Director	Maitland, FL 32751			
LAPresident		□President			<u>-</u> .	
□Vice President		□Vice President		·		
☐ Secretary	□Treasurer	☐ Secretary ☐ Treasurer				
□Other	Other	Other	□Other			
□Chairman	Peter Edwards	□Chairman	Steven Roberts			
	1 Tanfield Address:	□ Vice Chairman	2 Gatwick Metro Centre			
Director	Edinburgh EH3 5DA UK	∯Director	Balcomb Road			
□President		□President	Horley Surrey	RH6 9GA U	JK	
□Vice President		□Vice President				
□ Secretary	□Treasurer	☐ Secretary		□Treasurer		
□Other	□Other	□Other	<u>_</u>	□Other □		
				JAN 22	? :	
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:	<u>ح</u>	٠,	
□Director		□Director			 	
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	□Other	□Other		□Other		
	Use an attachment to report more than six (6). The an added to the index when filing your Florida Departicular of Directors (1) and (2) are the six (4).	tment of State Annual Re				

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.

, Richard Hammond

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "COMTREX SYSTEMS CORPORATION" 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 SIXTEENTH DAY OF JANUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

2020 JAN 22 PH 5: 47

Authentication: 202202131

Date: 01-16-20

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