

F200000001948

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

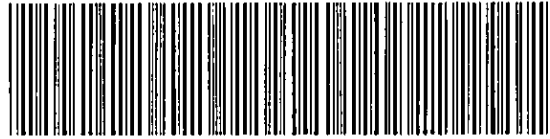
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200343724642

2020 APR 27 AM 9:14  
2020 APR 27 PM 1:39

RECEIVED

STATE  
CLERK  
TALLAHASSEE, FLORIDA

526  
4/28/20

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 272539 4309411

AUTHORIZATION :

COST LIMIT : \$ CHECK PROVIDED

ORDER DATE : April 24, 2020

ORDER TIME : 9:46 AM

ORDER NO. : 272539-005

CUSTOMER NO: 4309411

FOREIGN FILINGS

NAME: DTI MOTION CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER: \_\_\_\_\_

2020.6.27 AM 9:14



**Terms and Conditions:**

- \* Please keep this copy for your record of the transaction
- \* Money Orders are not valid for more than \$1000
- \* The sender/drawer agrees to enter the name of the payee and to sign the instrument immediately upon purchase
  - Failure to do so will result in the sender/drawer bearing the risk of any loss or theft of this instrument
- \* The laws of a specific state will consider these funds to be "abandoned" if this Money Order is not cashed by a certain time
- \* Placing a Stop Payment on a Money Order
  - Sender/Drawer can place a stop payment on an unpaid Money Order
  - Please visit a Chase Branch to place a stop and have the item re-issued
- \* Please visit a Chase branch to report a lost, stolen, or destroyed Money Order or for any other information about this item

FOR YOUR PROTECTION SAVE THIS COPY

Customer Copy

**MONEY ORDER**

9523001690

04/23/2020

Pay To The  
Order Of:

\$\*\* 78.75

Pay: SEVENTY EIGHT DOLLARS AND 75 CENTS

NOT VALID FOR MORE THAN \$1000.00

Memo: \_\_\_\_\_  
Note: For information only. Comment has no effect on bank's payment.

**NON NEGOTIABLE**

SENDER/DRAWER

282111107 NEW 01/08 6810004308

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK



**MONEY ORDER**

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

9523001690

Date 04/23/2020

440

Pay To The  
Order Of:

FLORIDA DEPARTMENT OF STATE

\$\*\* 78.75 \*\*

Pay: SEVENTY EIGHT DOLLARS AND 75 CENTS

NOT VALID FOR MORE THAN \$1000.00

Do not write outside this box

Memo: \_\_\_\_\_  
Note: For information only. Comment has no effect on bank's payment.

SENDER/DRAWER

ADDRESS

JPMorgan Chase Bank, N.A.  
Columbus, OH



⑈9523001690⑈ ⑆044000037⑆ 758661193⑈

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DTI MOTION CORP

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:

MARK BRODERICK

Name of Person

DTI MOTION CORP

Firm/Company

6968 PROFESSIONAL PARKWAY EAST

Address

SARASOTA FLORIDA 34240

City/State and Zip code

MB@DTIMOTION.COM

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

For further information concerning this matter, please call:

MARK BRODERICK

at (941) 3232491

Name of Person

Area Code

Daytime Telephone Number

**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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy

2020 Nov 27 11:19:14

**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. DTI MOTION CORP  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 84-5146410  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JANUARY 27 2020 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6968 PROFESSIONAL PARKWAY EAST, SARASOTA, FLORIDA, 34240  
(Principal office street address)

\_\_\_\_\_  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: MARK BRODERICK

Office Address: 6968 PROFESSIONAL PARKWAY EAST  
SARASOTA, Florida 34211  
(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

2020 FEB 27 PM 9:14

**A. DIRECTORS**

☒ Chairman Name: HASSAN KOTOB  
☐ Vice Chairman Address: \_\_\_\_\_  
☒ Director 6968 Professional Parkway East  
☐ President Sarasota  
☐ Vice President Florida 34240  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

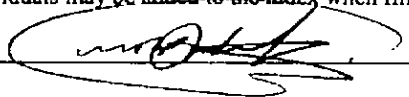
☐ Chairman Name: Mark Broderick  
☐ Vice Chairman Address: \_\_\_\_\_  
☒ Director 6968 Professional Parkway East  
☒ President Florida 34240  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12.  \_\_\_\_\_  
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. Mark Broderick  
(Typed or printed name and capacity of person signing application)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DTI MOTION CORP." 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-FOURTH DAY OF APRIL, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DTI MOTION CORP." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2020.

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

2020 APR 27 PM 9:14



7806036 8300

SR# 20203144027

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202825973

Date: 04-24-20