

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000124590 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 : (844)386-0178 Der : (214)317-4754 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:____

FOREIGN PROFIT/NONPROFIT CORPORATION TRANSATICA CORP

Certificate of Status	0 3
Certified Copy	0 2 5
Page Count	03 5
Estimated Charge	\$70.00
	र्वा <i>े</i> क

Electronic Filing Menu Corporate Filing Menu

1000 311 Help **VPR 3.6 CCC3**

To: 18506176383 From: 14693173436 Date: 04/28/20 Time: 2:17 PM Page: 02/04

(((H20000124590 3)))

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.

TRANSATICA (
(Enter name of co	orporation, must include "INCORPORATED," " orp." "Inc," "Co," or "Corp.")	COMPANY," "CORPORAT	ION,"
(If name unavaila	ble in Florida, enter alternate corporate name ade	opted for the purpose of transa	eting business in Florida)
Delaware	3.		
(State or country \$/6/2019	3		
(Date	of incorporation) 5	(Date of duration, if otl	her than perpetual)
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) 2, F.S., to determine penalty la	ability)
800 Southwest 12	9th Place, Apt 103, Miami, FL, US, 33184		
	(Principal office	street address)	
800 Southwest 13	29th Place, Apt 103, Miami, FL, US, 33184		
		address, if different)	
Name and stree	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	
Name:	Andy Gonzalez		
ffice Address:	800 SW 129 PI, Apt. 103		
Thee Address.	Miami	Florida 33184 (Zip code)	
	(City)	(Zip code)	
	antia apportunce:		
	ent's acceptance: ied as registered agent and to accept service	e of process for the above s	tated corporation at the pla
والمنام والمالية المالية	a=a lie at au . I be a poly account the annount m	ont as registerea avent anu-	apree to act at this cupaci
urther agree to c	omply with the provisions of all statutes relewith and accept the obligations of my posi-	anve to the proper and con	apreception flance of my
na i am Jamiliai	with and accept the obligations of my post	atom and regarder on any order	
£	Indy Gonzalez		
Ar —	ndy Gönzəlez (Apr 28, 2020) (Registered agent's sig	nature)	·
	(McBiziciea yBein 2 ziñ	1101010)	

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 eustody of corporate records in the jurisdiction under the law of which it is incorporated.

To: 18506176383 From: 14693173436 Date: 04/28/20 Time: 2:17 PM Page: 03/04

(((H20000124590 3)))

Chauman	Name Andy Gonzalez	□Chairman Name			
■ Vice Chairman	Address.	□Vice Chairnian Address			
■Director	800 Southwest 129th Place, apr 103	Director			
■ President	Miami, FL, 33184	□President			
■ Vice President		□ Vice President			
Secretary	i Treasurer	☐ Secretary	□Treasurer		
≣ Other <u>CEO</u>	CFO ■Other	Other	□Other		
□Chairman	Name:	□Chairman Name: _			
□Vice Chairman	Address:	□ Vice Chairman Address:			
ElDirector		Durector			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	Treasurer		
□Other	Other	□Other	í Other		
□Chairman	Name:	□Chairman Name: _			
□Vice Chairman	Address:	□Vice Chairman Address	:		
Director		□Director			
□President		. President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	Treasurer		
Other	□Other	□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 Andy Gonzalez Signature of Director of 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 \$17,155. F.S.

13. Andy Gonzalez , CEO

(((H20000124590 3)))



Page 1

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

DELAWARE, DO HEREBY CERTIFY "TRANSATICA 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-EIGHTH DAY OF APRIL, 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 SAID "TRANSATICA CORP" WAS INCORPORATED ON THE SIXTH DAY OF AUGUST, A.D. 2019.

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

(((H20000124590 3)))

3

Authentication: 202840505

Date: 04-28-20

7549405 8300 SR# 20203223321