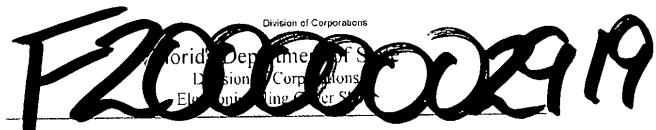
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colin.amor@katechnologies.com Email Address:\_

## FOREIGN PROFIT/NONPROFIT CORPORATION

KA Technologies Inc.

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JUN 3 0 2020

## STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM. THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

FURTHER CERTIFY THAT KA TECHNOLOGIES INC. (D06960785), INCORPORATED AUGUST 16, 2002, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER, AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS. AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFINED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JUNE 29, 2020.

Michael L. Higgs

Director



301 West Presion Street, Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

> Online Certificate Authentication Code: nEuludc7AE2YuGBK5s3PTQ To verify the Authentication Code, visit http://dat.maryland.gov/verify

Fax Audit # H20000200982 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.

| f name unavailab                |  | adopted for the purpose of transacting business                                    | in Florida) |
|---------------------------------|--|--|-------------|
| Maryland                        | 3. under the law of which it is incorporated)                          | 04-3709011 (FEI number, if applicable)   |             |
|                                 | under the law of times in a message                                    | • •  |             |
| 8/16/2002                       | f incorporation) 5.  | Perpetual  |             |
|                                 |  | (Date of duration, if other than perp  | emai)       |
| Upon Qualifica                  |  |  |             |
|                                 | (Date first nansacted business i<br>(SEE SECTIONS 607.1501 & 607.1     | n Florida, if prior to registration)<br>502, F.S., to determine penalty liability) |             |
| 13120 Glen F                    | d., North Potomac, Maryland 2087                                       | 78   |             |
|                                 |  | pal office address)  |             |
|                                 | _  | O Hay NOT accentable)  |             |
| Name and <u>street</u><br>Name: | address of Florida registered agent: (P. Business Filings Incorporated |  |             |
| Name:                           |  |  |             |
| Name:                           | Business Filings Incorporated 1200 South Pine Island Road              |  |             |
|                                 | Business Filings Incorporated 1200 South Pine Island Road              |  |             |

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.

Fax Audit # H20000200982 3

| 11. Name   | s and business addresses of officers and/or directors:  |  |
|------------|---|--|
| A. DIREC   | CTORS   |  |
| Chairman:  |   |  |
| Address: _ |   |  |
|            |   |  |
| Vice Chain | man:  |  |
| Address: _ |   |  |
| _          |   |  |
|            | Kellie Amor   |  |
| Address:   | 13120 Glen Rd., North Potomac, Maryland 20878   |  |
| _          |   |  |
| Director   | Colin Amor  |  |
| Address:   | 13120 Glen Rd., North Potomac, Maryland 20878   |  |
|            |   |  |
| B. OFFI    | CERS  |  |
| President: | Kellie Amor   |  |
|            | 13120 Glen Rd., North Potomac, Maryland 20878   |  |
|            |   |  |
| Vice Presi | ident:  | <u> </u>                                 |
|            |   | <u> </u>                                 |
| ,          |   | .\ |
| Secretary: | Colin Amor  | *** • • •                                |
| Address:   | 12120 Clay Rd. North Potomac Maryland 20878   | <del></del> .                            |
| Treasurer  | Kallia Amor   | 27                                       |
|            | 13120 Glen Rd., North Potomac, Maryland 20878   |  |
|            | If necessary, you may attach an addendum to the application listing additional officers and or di   | irectors.                                |
|            | Kellie Anor   |  |
|            | Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that the fac                  | is stated herein                         |
| are true   | and that he or she is aware that false information submitted in a document to the Department of the egree felow as provided for in \$.817.155, F.S. | State constitutes                        |
|            | ellie Amor, President   |  |
|            | (Typed or printed name and capacity of person signing application)  |  |