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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300 : (608)827-5501 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: __pjehlecpa@gmail.com

FOREIGN PROFIT/NONPROFIT CORPORATION

FasTrack Solutions, Inc.

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| \$70.00 |
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Electronic Filing Menu Corporate Filing Menu

Help

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING ÈS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

| Enter fame of con | TO THE RESERVE OF STREET AND A STREET | " "COMPANY " "CORPORATION | . · |
|--|--|---|--|
| 'Inc.," "Co.," "Con | poration; must include "INCORPORATED p. ""Inc." "Co." or "Corp.") | , COMPART. CORPORATION | ••. • |
| | • | | |
| | yment Solutions, Inc. | | |
| If mune unavailab | le in Florida, enter alternate corporate nam | e adopted for the purpose of transaction | ig business in Florida) |
| Nevada | | 84-2030629 | |
| | under the law of which it is incorporated) | (FEI number, if ap | iplicable) |
| 6/6/2019 | | S - Perpetual | |
| (Date o | fincorporation) | (Date of duration, if other | than perpetual) |
| Upon Qualifica | uíon | | |
| | (Date first transacted husiness | s in Florida, if prior to registration) | irre) |
| | • | 1502, F.S., to determine penalty liabi | |
| 9125 Archiba | ld Ave Ste A. Rancho Cucamong | | |
| | (Prin | cipal office address) | |
| | | | |
| | (Current na | iling address, if different) | |
| | • | | |
| • | | | |
| Name and <u>street</u> | address of Florida registered agent: (| P.O. Box NOT acceptable) | |
| Name and street Name: | address of Florida registered agent: (Business Filings Incorporated | P.O. Box NOT acceptable) . | |
| Name: | Business Filings Incorporated | · · | |
| Name: | Business Filings Incorporated 1200 South Pine Island Road | · | |
| Name: | Business Filings Incorporated 1200 South Pine Island Road Plantation | Florida 33324 | |
| • | Business Filings Incorporated 1200 South Pine Island Road | · | |
| Name: fice Address: | Business Filings Incorporated 1200 South Pine Island Road Plantation (City) | Florida 33324 (Zip code) | |
| Name: fice Address: Registered age | Business Filings Incorporated 1200 South Pine Island Road Plantation (City) nt's acceptance: and as registered agent and to accept so | Florida 33324 (Zip code) | ted corporation at the p |
| Name: fice Address: Registered age wing been name | Business Filings Incorporated 1200 South Pine Island Road Plantation (City) nt's acceptance: ed as registered agent and to accept se | Florida 33324 (Zip code) ervice of process for the above sta | gree to act in this capat |
| Name: fice Address: Registered age wing been names signated in this order to contact the contact of the contac | Business Filings Incorporated 1200 South Pine Island Road Plantation (City) nt's acceptance: ed as registered agent and to accept so application, I hereby accept the appo | Flotida 33324 (Zip code) ervice of process for the above sta intment as registered agent and a les relative to the proper and comp | gree to act in this capac plete performance of my |
| Name: fice Address: Registered age wing been names signated in this or the property of the control of the cont | Business Filings Incorporated 1200 South Pine Island Road Plantation (City) nt's acceptance: ed as registered agent and to accept se | Flotida 33324 (Zip code) ervice of process for the above sta intment as registered agent and a les relative to the proper and comp | gree to act in this capac plete performance of my |
| Name: fice Address: Registered age tving been names ignated in this price to contact the contact of the contact to contact the contact | Business Filings Incorporated 1200 South Pine Island Road Plantation (City) nt's acceptance: ed as registered agent and to accept so application, I hereby accept the appoint of all statut amiliar with and accept the obligation | Flotida 33324 (Zip code) ervice of process for the above sta intment as registered agent and a ses relative to the proper and comp as of my position as registered age | gree to act in this capac plete performance of my |
| Name: fice Address: Registered age tving been names ignated in this price to contact the contact of the contact to contact the contact | Business Filings Incorporated 1200 South Pine Island Road Plantation (City) Int's acceptance: ed as registered agent and to accept so application, I hereby accept the appoint of all statut amiliar with and accept the obligation Mark Williams, A | Flotida 33324 (Zip code) ervice of process for the above sta intment as registered agent and a ses relative to the proper and comp as of my position as registered age | gree to act in this capac plete performance of my |

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.

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| To: | Page | 5 | of | 5 |
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| II. Ņame | s and business addresses of officers and/or directors: |
|-------------|---|
| A. DIRE | CTORS |
| Chairman: | |
| | |
| | |
| Vice Chairi | nan; |
| | |
| | |
| Director: _ | Adam James |
| Address: _ | 9125 Archibald Ave Ste A, Rancho Cucamonga, California 91730 |
| | |
| Director: | |
| | |
| | |
| B. OFFI | |
| President: | Adam James |
| | 9125 Archibald Ave Ste A, Rancho Cucamonga, California 91730 |
| | |
| Vice Presic | Byron Sanders |
| | 9125 Archibald Ave Ste A, Rancho Cucamonga, California 91730 |
| | |
| Secretary: | Phil Jehle |
| Address: | 3 Fort Sumter Court, Saint Charles, Missouri 63303 |
| Treasurer: | Phil Jehle |
| Address: | 3 Fort Sumter Court, Saint Charles, Missouri 63303 |
| NOTE: 1 | f necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| 12. | Pity. J.J.M. Signature of Director or Officer |
| The office | Signature of Director or Officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein |
| are true a | ad that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s 817.155, F.S. |
| | il Jehle, Secretary |
| | (Typed or printed name and capacity of person signing application) |





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I. Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **FASTRACK SOLUTIONS, INC.**, as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 06/06/2019, and is in good standing in this state.



Certificate Number: B20200721940187

You may verify this certificate online at http://www.nysos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 07/21/2020.

Barbara K. Cegavske
BARBARA K. CEGAVSKE
Secretary of State