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COVER LETTER

~	in of Corporations					
SUBJECT:	MELE Associates, Inc.					
30D0DC1.	N	ame of corporation	n - must	include suffix		
Dear Sir or M	adam:					
"Certificate of	"Application by Foreig Existence," or "Certif ced foreign corporation	icate of Good Sta	inding" a	nd check are submit	usiness in Flo ed to register	orida." the
Please return a	all correspondence con	cerning this matte	er to the f	Collowing:		
Caitlin Rollins						
	· · · · · · · · · · · · · · · · · · ·	Name o	f Person			
MELE Associa	ites, Inc.					
_ ,		Firm/Co	mpany			
11 Taft Court.	Suite 101					
	····	Add	ress		-	
Rockville, MD	20850					
		City/State	and Zip	code		
caitlin.rollins@	meleassociates.com			ı		
	E-mail ad	dress: (to be used	for futur	e annual report noti	ication)	
For further in	formation concerning t	his matter, please	call:			202
Caitlin Rollins		at (<u></u>	1 453	-6946		=
Name	e of Person	Area Co	de	Daytime Telephon	e Number	. 27
Regis Divisi The C 2415	tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suit nassee, FL 32303			MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL.	on orations	2020 JFT, 27 PT, 5: 05
Enclosed is a Please make ch \$70.00 Fili	_	DA DEPARTMEN	□ \$78.7		387.50 Fili 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.

MELE Associate	es, Inc.		
	orporation: must include "INCORPORATED, orp." "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORAT	ION,"
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transa	ting business in Florida)
Delaware	3	521819489	
(State or country	y under the law of which it is incorporated)	(FEI number, it	applicable)
04/23/1993	5		
(Date	of incorporation)	(Date of duration, if oth	er than perpetual)
07/16/2020			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty lia	bility)
11 Taft Court, Su	ite 101 Rockville, MD 20850		
		ice <u>street</u> address)	
	(Current mailir	ng address, if different)	7
			020
Name and stree	et address of Florida registered agent: (P.C). Box NOT acceptable)	: خو
Name:	Registered Agent Solutions, Inc.		2020 Ji" 27
fice Address:	155 Office Plaza Dr. Suite A	·	P
rice / tadrets.	Tallahassee	. Florida 32301	5: 05
	(City)	(Zip code)	, v
aving been nam signated in this rther agree to co	ent's acceptance: sed as registered agent and to accept serviced as registered agent and to accept service supplication, I hereby accept the appoints supply with the provisions of all statutes resident and accept the obligations of my po	nent as registered agent and a relative to the proper and comp	gree to act in this capacity. Olete performance of my dut
	(Registered agent's s	ignature)	
	(meginicionalignitis)	· ························· /	

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

under the law of which it is incorporated.

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

A. DIRECTORS	me: Melvin Chiogioji		 	an Chiogioji
	11 Taft Court, Suite 101	□ Chairman	Name:	11 Taft Court, Suite 101
Ro	dress:ckville, MD 20850	□Vice Chairman	1	e, MD 20850
□Director		□ Director		
_		□President		
		□Vice President		
□Secretary	□Treasurer	■ Secretary		Treasurer
□Other	Other	□Other		□Other
	me:dress:	□Chairman □Vice Chairman		
□Director		□Director	-	
□President		□President		
□Vice President	<u> </u>	□Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other		Other		□Other
□Chairman Na	me;	□Chairman	1	
□ Vice Chairman Ad	dress:	□Vice Chairman	Address:	2020
□Director		□Director		
□ President		□President		27
□Vice President		□Vice President		er quing
☐ Secretary	□Treasurer	□Secretary		□Treasuref 🖓
□Other	Other	□Other		□Other
12. The officer or director:	an attachment to report more than six (6). The ed to the index when filing your Florida Depar Signature of Direct signing this document (and who is listed in nur nformation submitted in a document to the Department of the Depart	tment of State Annual Re or or Officer nber 11 above) affirms th	eport form.	stated herein are true and that he or
13. Alan Chiogioji, C				

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MELE ASSOCIATES, INC." 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 TENTH DAY OF JULY, A.D. 2020.

2020 JULY 27 PH 5: US

2333745 8300 SR# 20206138322

Authentication: 203262262

Date: 07-10-20

You may verify this certificate online at corp.delaware.gov/authver.shtml