# F2000003900

(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:				
(62000) X02547				





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2020 SEP -4 AH 10: 29

**SEP** 10 2020 M. SOLOMON



### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 19, 2020

ISABELLA BARBERA 2041 NW 15TH AVENUE POMPANO BEACH, FL 33069 US

SUBJECT: BASANITE INC Ref. Number: W20000062547 le submission w/ paper work + payment.

We have received your document for BASANITE INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$300.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 420A00012175

RECEIVED
SEP 0 4 2020

## **COVER LETTER**

TO:	_	tration Section ion of Corporations			
SHRJ	ECT:	BASANITE, INC.			
	•	·	orporation -	must include suffix	
Dear S	ir or M	adam:			
"Certif	icate o		Good Stand	authorization to Transact Business in Flo ing" and check are submitted to register s in Florida.	
Please	return :	all correspondence concerning	this matter	o the following:	
ISABE	LLA BA	ARBERA			
			Name of P	erson	
BASA	NITE,IN	IC,			
		<del></del>	Firm/Comp	any	
2041 N	<b>V</b> W 15T	H AVENUE			
			Addres	38	<del></del>
РОМР	ANO B	EACH, FL 33069			
IB@B/	TINASA	EINDUSTRIES.COM	ity/State an	d Zip code	
		E-mail address: (t	o be used fo	r future annual report notification)	
For fur	ther in	formation concerning this matter	er, please ca	II:	
ISABE	LLA BA	ARBERA	954	532-4653	
	Name	e of Person	Area Code	Daytime Telephone Number	_
	Regis Divisi The C	EET/COURIER ADDRESS: tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please i	make ch	check for the following amountek payable to: FLORIDA DEPaing Fee \$78,75 Filing F  Certificate of S	ARTMENT (	\$78.75 Filing Fee & \$87.50 Fili	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.

H name unavai	able in Florida, enter alternate corporate name ac	lopted for the purpose of transacting business in Florida)
NEVADA		0-4959207
(State or count 05/30/2006	ry under the law of which it is incorporated)  5.	(FEI number, if applicable)
(Dati 12/12/2018	of incorporation)	(Date of duration, if other than perpetual)
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	
041 NW 15TH	AVENUE, POMPANO BEACH, FL 33069	
	(Principal office	street address)
		estreet address) address, if different)
Name and stre	(Current mailing	address. if different)
		address. if different)
Name and <u>stre</u> Name: ice Address:	(Current mailing et address of Florida registered agent: (P.O.	address. if different)
Name:	(Current mailing et address of Florida registered agent: (P.O. DAVID ANDERSON	address. if different)

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.

A. DIRECTORS				
<b>■</b> Chairman	<del></del>	□Chairman	Name: PAUL SALLARULO	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	POMPANO BEACH, FL 33069	■Director	POMPANO BEACH, FL 33069	
(I)President		□Presideni		
□Vice President		∐Vice President		
☐ Secretary	[] Treasurer	ElSecretary	□Treasurer	
□Other	ClOther	ElOther	Other	
□Chairman	Name: RONALD J LORICCO SR 2041 NW 15TH AVE	□Chairman	Name:	
□Vice Chairman	Address;	□Vice Chairman	Address: 2041 NW 15TH AVE	
Director	POMPANO BEACH, FL 33069	■Director	POMPANO BEACH, FL 33069	
□President		□President	2020	
□ Vice President		□Vice President		
☐ Secretary	□Treasurer	□Secretary	□Treasurer - 1	
□Other	□Other	□Other	□Other : S	
□Chairman	Name: GREGORY CLINE	□Chairman	KELLY PATTERSON C	
□Vice Chairman	Address:		Address: 2041 NW 15TH AVE	
■Director	POMPANO BEACH, FL 33069	<b>⊕</b> Director	POMPANO BEACH, FL 33069	
□President		ElPresident		
☐ Vice President		□Vice President		
□Secretary	ElTreasurer	□ Secretary	□Treasurer	
Other	ElOther	[]Other		
Important Notice: Undividuals may be	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department of Directors	ent of State Annual Rep A <i>OFO</i>	for reporting purposes only. Non-indexed port form.	

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

B. ISABELLA BARBERA CFO

s.817.155, F.S.

A. DIRECTORS	.:		
□Chairman	Name: DAVID ANDERSON	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director	POMPANO BEACH, FL 33069	[]Director	POMPANO BEACH, FL 33069
□President		□President	
■ Vice President	<del></del>	CIVice President	
□Secretary	<b>ElTreasurer</b>	<b>■</b> Secretary	Treasurer
ElOther		[]Other	
□Chairman	Name:	⊟Chairman	Name:
□Vice Chairman	2041 NW 15TH AVF	□Vice Chairman	Address:
□Director	POMPANO BEACH, FL 33069	□Director	
■President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other		□Other	Other
□ Chairman	Name:	□Chairman	Name: SFP
	Address:	□Vice Chairman	Address:
Director		∐Director	
□President		ElPresident	
∐Vice President		ClVice President	
☐ Secretary	□Treasurer	ElSecretary	□Treasurer
□Other	DOther	□Other	Other
Important Notice: Undividuals may be	Ise an attachment to report more than six (6). The attachded to the index when filing your Florida Departme	ant of State Annual Re	d for reporting purposes only. Non-indexed sport form.
	Signature of Director of	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 \$.817.155, F.S.

, ISABELLA BARBERA CFO

SECRETARY OF STATE



## 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 following is a list of all organizational documents on file in this office for

#### BASANITE, INC.

Organizational Documents on File	Filing Date	
Articles of Incorporation	05/30/2006	
Certificate of Amendment	02/23/2007	
Certificate of Designation	04/29/2008	
Certificate of Amendment	02/22/2010	
Certificate of Amendment	03/21/2013	
Certificate of Amendment	04/26/2013	
Articles of Merger	12/12/2018	

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, BASANITE, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 05/30/2006, and is in good standing in this state.