## F2000005482

(Re	equestor's Name)			
(Ad	ddress)			
(Ac	ddress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

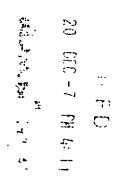
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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: HALA SYSTEMS, INC			
SORIFCI:	lame of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Forei "Certificate of Existence," or "Certi above referenced foreign corporatio	ficate of Good Stand	ng" and check are subm	
Please return all correspondence cor	ncerning this matter to	o the following:	
BONNY JENNINGS			
	Name of Pe	erson	
ROSS & MONCURE, INC.			
	Firm/Comp	any	
726 N. WASHINGTON STREET			
	Addres	s	
ALEXANDRIA, VA 22314			
	City/State and	I Zip code	
BONNY@ROSSMONCURE.COM			
E-mail ac	ddress: (to be used fo	r future annual report no	tification)
For further information concerning	this matter, please ca	l:	
BONNY JENNINGS	at (	549-5276	
Name of Person	Area Code	Daytime Telepho	ne Number
STREET/COURIER ADE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Sui Tallahassee, FL 32303		MAILING AD Registration Sec Division of Con P.O. Box 6327 Tallahassee, FL	ction porations
<del>-</del>	DA DEPARTMENT ( Filing Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy



November 13, 2020

BONNY JENNINGS 726 N WASHINGTON ST ALEXANDRIA, VA 22314

SUBJECT: HALA SYSTEMS, INC. Ref. Number: W20000130411

We have received your document for HALA SYSTEMS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 620A00022798

RECEIVED DEC 0 7 2020

## 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.

•	ible in Florida, enter alternate corporate name ad		-	Florida)
DELAWARE	3. 4	7-4606264 (FE! number, if ap		
(State or countr	yunder the law of which it is incorporated)	(FEI number, if ap	olicable)	
10/03/2018				
(Date	of incorporation)	(Date of duration, if other than perpetual)		1)
·10/15/2016		• • •		
···	(Date first transacted business in F			
1001 ATU ST N (	(SEE SECTIONS 607.1501 & 607.1502 STE 300, ST. PETERSBURG, FL 33702	z, r.s., to determine penalty liabili	(y)	
			<del></del>	
SOLO NI CULIDO	rancipal office) -H ST, PMB 43000, WILMINGTON, DE 19802	: street address)		
ZOTO IN CHURC		address, if different)		
	(Current maning	addiess, ii different)		
Name and stree	t address of Florida registered agent: (P.O.	Box NOT acceptable)		
	Registered Agents Inc.		••	-
Name:		<del></del>	:	
	7901 4th St N STE 300	<u> </u>	-	:
Tice Address:		22702		5.3
fice Address:	St. Petersburg	Florida 33702		
fice Address:	St. Petersburg (City)	, Florida 33702 (Zip code)		2.5

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.

Bill Havre - Assistant Secretary

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

(Registered agent's signature)

•	· •			
A. DIRECTORS	IOIDI IAECED			
Chairman	JOHN JAEGER Name:	□ Chairman	Name:	
□Vice Chairman	Address: 9308 GLACIER RIDGE	□Vice Chairman	Address:	
□Director	RICHMOND, IL 60071	□Director		
President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	Secretary		☐Treasurer
□Other	Other	□Other	<u></u>	□Other
□Chairman □Vice Chairman	Name: DAVID LEVIN  6918 BLUE MESA DRIVE	□Chairman □Vice Chairman		
□Director	DALLAS, TX 75252	□Director		
□President		□President		
		□Vice President		
Secretary	Treasurer	☐ Secretary		☐Treasur <del>e</del> r
■Other COO	Other	□Other		□ Other
□Director	Name: MARKO OROZ  Address: 4332 VILLA DRIVE  UNIT 6  CINCINNATI, OH 45242	□Chairman □Vice Chairman □Director		
□President		□President		
□Vice President		□Vice President		
Secretary	☐Treasurer	☐ Secretary		☐Treasurer
CFO CFO	Other	□Other	<del></del>	□Other
individuals may be  12.  The officer or dire	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department Signature of Director or ctor signing this document (and who is listed in number alse information submitted in a document to the Department egger	Officer  11 above) affirms the	eport form.	herein are true and that he or





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

DELAWARE, DO HEREBY CERTIFY "HALA SYSTEMS, 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 TWENTY-FIRST DAY OF NOVEMBER, A.D.

2020.

Authentication: 204137618

Date: 11-21-20