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### **COVER LETTER**

TO:		tration Section on of Corporations			
SUBJ	ECT:	LuminUltra Technologies Inc.			
0000	LC	Name o	of corporation -	must include suffix	
Dear S	ir or M	adam:			
"Certif	icate o	"Application by Foreign Conference," or "Certificate ced foreign corporation to tra	of Good Standi	uthorization to Transact Business in ng" and check are submitted to reg in Florida.	n Florida," ister the
Please	return	all correspondence concerni	ng this matter to	the following:	
Karen I	Brewer				
			Name of Po	erson	
Luminl	Ultra Te	chnologies Inc.			
	_		Firm/Comp	any	
520 Kii	ng Stree	t, Suite 850			
			Addres	S	
Frederi	cton, N	B E3B 6G3 Canada			7.3
			City/State and	l Zip code	·
karen.b	rewer@	duminultra.com			
		E-mail address	: (to be used for	r future annual report notification)	٠,
For fur	rther in	formation concerning this m	atter, please cal	l:	
Karen Brewer			506	300-9226	
	Nam	e of Person	Area Code	Daytime Telephone Number	r
STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please	make el	check for the following amonet payable to: FLORIDA DI ing Fee \$78.75 Filin Certificate of	EPARTMENT ( g Fee &	\$78.75 Filing Fee &  S87.50 Certified Copy Certif	) Filing Fee, icate of Status & ied Copy

## - 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.

LuminUltra Tec	chnologies Inc.			
	corporation; must include "INCORPORATED. Corp." "Inc." "Co." or "Corp.")	" "COMPANY," "CORPORATION,"		
(If name unavail	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting	ousiness in Florida)	
2. Deleware	3.	83-0782836		
	ry under the law of which it is incorporated)	(FEI number, if applicable)		
4. May 30, 2018	5.			
(Date	e of incorporation)	(Date of duration, if other tha	n perpetual)	
6. December 1, 20	20			
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	ı	
7 1448 S. Rolling F	Rd., Suite 212, Baltimore Maryland, 21227, Ur	nited States		
r		ice <u>street</u> address)		
520 King St., Su	ite 850 Fredericton, NB E3B 6G3 Canada		-3	
	(Current mailir	ng address, if different)		
8. Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	- 3	
Name:	C T Corporation Systems		· •	
Office Address:	1200 South Pine Island Road	<u>.</u>	<del>.</del>	
	Plantation	, Florida	`	
	(City)	(Zip code)		

#### 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Nichol McCroy, Assistant Secretary
(Registered agent's signature)

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							
□Chairman	Pat Whalen Name:	□Chairman	Name: Kent C	arson			
□Vice Chairman	Address:	□Vice Chairman	Address: 520	King St., Suite 850			
(≩Director	520 King St., Suite 850	Director	Fredericton,	NB E3B 6G3			
■President	Fredericton, NB E3B 6G3	□President	Canada				
DVice President	Canada	□Vice President					
☐Sceretary	□Treasurer	Secretary		CXTreasurer			
.⊒Other	[]Other	□Other		□Other			
⊒Chairman	Name: Chris McIntire	□Chairman	Name:				
DVice Chairman	Address: 16 Robin Hill Rd.	□Vice Chairman	Address:				
Director	Danvers., MA 01923	□Director					
□President	USA	□President					
□Vice President	·	□ Vice President		<del></del>			
Secretary	□Treasurer	□Secretary		□Treasurer			
. lOther	□Other	□Other		□Other <u>2</u>			
				, <u>-</u>			
<b>DC</b> hairman	Name:	□Chairman	Name:				
DVice Chairman	Address:	□Vice Chairman	Address:	· · · · · · · · · · · · · · · · · · ·			
.Director		□Director		<u> </u>			
JPresident		□President					
□Vice President		□Vice President					
DSceretary	□Treasurer	□Secretary		□Treasurer			
70ther	Other	□Other		Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.							
12	Pat Whalen,						
	Signature of Director or						
	ctor signing this document (and who is listed in number dse information submitted in a document to the Departr  Fat Whalen, CEO/President						
13		n siamuo annii nati oo					
(Typed or printed name and capacity of person signing application)							

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# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LUMINULTRA TECHNOLOGIES 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 DECEMBER, A.D.

2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 204377011

Date: 12-21-20

6908571 8300 SR# 20208711770