## F21000000740

(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:
email from Joseph to add officeradd
2/6/21

Office Use Only



000358987820

02/01/21--01041--010 ++00.00

53/4/21

## COVER LETTER

TO: Registration Section Division of Corporations		
Cill O A > -	es Corporation	
SUBJECT: OloNax + Caclemi Name of corporation - n	1	-
,		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Aut "Certificate of Existence," or "Certificate of Good Standin above referenced foreign corporation to transact business in the corporation to the c	g" and check are submitted to register the	
Please return all correspondence concerning this matter to	the following:	
Name of Per	son o	-
Coldsol Academie	es Corporation	
Firm/Compar	ny	-
1037 Joth Street	-	
Address	. ,	
Dilardo, FL, 32	= 208	
City/State and 2		_
10 i Maher @)qua	eilicom !	_
E-mail address: (to be used for	future annual report notification)	
For further information concerning this matter, please call:	·.	
N . A . 1		
supply Maher at (407)	968-0070	
Name of Person Area Code	Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations P.O. Box 6327	
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	Tallahassee, FL 32314	
Enclosed is a check for the following amount:		
Please make check payable to FLORIDA DEPARTMENT OF		
7,	78.75 Filing Fee & S87.50 Filing Fee, certified Copy Certificate of Status Certified Copy	. &

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

"lnc.," "Co.," "C	_	ne adopted for the purpose of transacting business in Florida)
120		3. 85-4185513
(State or counti	y under the law of which it is incorporated)	(FEI number, if applicable)
(Date	of incorporation)	(Date of duration, if other than perpetual)
	(Principal of	ffice street address)
	(Current mail	ling address, if different)
Name and <u>stree</u> Name:  fice Address:	Staddress of Florida registered agent: (P Sepl. Mahe 1037 20th Streen  Drawo FL  (City)	2.0. Box NOT acceptable)  2.1.  Plorida 3280  (Zin godu)
	ent's acceptance: ed as registered agent and to accept ser	vice of process for the above stated corporation at the plac tment as registered agent and agree to act in this capacity

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)

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

□Chairman Name:	ЭСпантан	Name:		
□Vice Chairman Address: 103728th S	Huet DVice Chairman	Address:		
Director Orland O. FL3	2805 Director			
President Texeph Wahe	□President			
□Vice President	□Vice President	:		
□Secretary □Treasurer	☐ Secretary	□Treasurer :		
□Other □Other	Other			
		7 E; 		
□Chairman Name:	□Chairman	Name:		
□Vice Chairman Address:	□ Vice Chairman	Address:		
□ Director	☐ Director			
□ President	□President			
□Vice President	□Vice President			
□ Secretary □ Treasurer	Secretary	□Treasurer		
□Other □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.  Signature of Director 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 s.817.155, F.S.  (Typed or printed name and capacity of person signing application)				

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GLOBAL ACADEMIES CORPORATION" 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-EIGHTH DAY OF JANUARY, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLOBAL ACADEMIES CORPORATION" WAS INCORPORATED ON THE THIRTIETH DAY OF NOVEMBER,

A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES

HAVE BEEN ASSESSED TO DATE.

\_\_\_\_

Authentication: 202389183

Date: 01-28-21