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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	TEKMOS, INC.	
		tion - must include suffix
Dear 3	Sir or Madam:	
"Certi		for Authorization to Transact Business in Florida," Standing" and check are submitted to register the siness in Florida.
Please	return all correspondence concerning this ma	atter to the following:
LYN	REED	
	Name	of Person
TEKN	MOS, INC.	
-	Firm/	Company
7901	E RIVERSIDE DR. BLDG 2, SUITE 150	
-	A	ddress
AUST	IN, TX 78744	
	City/Sta	te and Zip code
LYNN	REED@TEKMOS.COM	
	E-mail address: (to be us	ed for future annual report notification)
For fu	rther information concerning this matter, plea	se call:
STEV	E SMITH 925	708-7786
	Name of Person Area	Code Daytime Telephone Number
	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	sed is a check for the following amount: make check payable to: FLORIDA DEPARTMI 0.00 Filing Fee	INT OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified 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.

TEKMOS, IN	IC. able in Florida, enter alternate corporate name	.4		
TEXAS	ance in Piorida, cuter aiteruate corporate name	- " -	ng ousmess in Fiorida)	
3		(FEI number, if a	- ifamiliable	
4/28/97	y under the law of which it is incorporated)	(reinumber, ii a	ppucable)	
	of incorporation) 5.	(Date of duration, if other	(Date of duration, if other than perpetual)	
N/A	·	(Dear of Gilladon, II Odice	tasa perpetial/	
7901 E RIVE	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 RSIDE DR, BLDG 2, SUTTE 150		lity)	
		ce street address)		
AUSTIN, TX 7		<u> </u>		
	(Current mailin	g address, if different)	1 10	
			, 	
Name and stree	t address of Florida registered agent: (P.C	Box NOT acceptable)	S	
Name:	ROBERT ABRAMS		r.;	
ice Address:	6503 N MILITARY TRAIL, APT 2207		, ,	
	BOCA RATON	33496	.5	
	(City)	, Florida(Zip code)	8	
ving been nami signated in this ther agree to co	ent's acceptance: ed as registered agent and to accept servic application, I hereby accept the appointm omply with the provisions of all statutes re with and accept the obligations of my pos	sent as registered agent and agr clative to the proper and comple	ee to act in this cana	

Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction ler the law of which it is incorporated.

A. DIRECTORS JONATHAN GEHM LYNN REED □ Chairman Name: □ Chairman Name: 3012 BARTON POINT CIRCLE 1909 SPLIT MOUNTAIN □ Vice Chairman Address: □Vice Chairman Address: **AUSTIN, TX 78733** CANYON LAKE, TX 78133 □ Director Director □President President ■ Vice President □Vice President Li Treasurer [] Secretary ☐ Treasurer □ Secretary COther_____ Other_____ ☐ Other _____ ☐Other _____ JAMES R BETTS □Chairman Name: 5008 HIBISCUS VALLEY DR □Vice Chairman Address: □ Vice Chairman Address: **AUSTIN, TX 78739** Director □ Director □President □President □Vice President □ Vice President ■ Secretary ☐ Treasurer □ Secretary Treasurer. □Other_____ □Other ____ []Other _____ Other_____ ROBERT ABRAMS [Chairman Name: **□**Chairman Name: ______ 6503 N MILTARY TRAIL □Vice Chairman Address: _ □ Vice Chairman Address: **APT 2207** □ Director □Director 7. President LlPresident BOCA RATON, FL 33496 I Vice President □ Vice President ☐Treasurer Secretary □ Secretary □ Treasurer Other _____ □Other_____ □Other_____ Other____ sortant Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed ividuals may be added to the index when filing your Florida Department of State Annual Report form. Signature of Director or Officer

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 s aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 1155, F.S.

LYNN REED, PRESIDENT

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



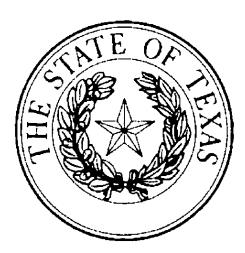
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for TEKMOS, INC. (file number 144336800), a Domestic For-Profit Corporation, was filed in this office on April 28, 1997.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 22, 2021.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Ruth R. Hughs Secretary of State