# F210001532

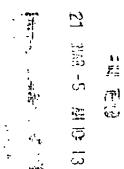
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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### COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Tektonux LLC			
Name	of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificat above referenced foreign corporation to	e of Good Stan	ding" and check are submitte	siness in Florida," ed to register the
Please return all correspondence concerr	ning this matter	to the following:	
lvy Hubler			
	Name of	Person	
Tektonux LLC			
	Firm/Com	pany	
102 Oakhurst Dr			
	Addre	ss	-
Madison AL 35758			
	City/State ar	nd Zip code	
Ivy@Tektonux.com			
E-mail addres	s: (to be used f	or future annual report notifi-	cation)
For further information concerning this r	natter, please c	all:	
Ivy Hubler	at (	975-5702	
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	
Enclosed is a check for the following am Please make check payable to: FLORIDA D  \$70.00 Filing Fee  \$78.75 Filiter Certificate	DEPARTMENT ng Fee & □		\$87.50 Filing Fee. 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.

Tektonux LLC		
(Enter name of c	orporation; must include "INCORPORATE forp." "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"
(If name unavail	able in Florida, enter alternate corporate nan	me adopted for the purpose of transacting business in Florida)
2. Alabama (State or country under the law of which it is incorporated)		83-4005951
(State or countr	y under the law of which it is incorporated)	) (FEI number, if applicable)
4. 03-18-2019		5. (Date of duration, if other than perpetual)
(Date	of incorporation)	(Date of duration. if other than perpetual)
6		
	(Date first transacted business	ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)
102 Oakhurst Dr	Madison AL 35758	, , , , , , , , , , , , , , , , , , , ,
/	(Principal o	office street address)
	(Current mai	ailing address, if different)
8. Name and street	et address of Florida registered agent: (1	P.O. Box NOT acceptable)
Name:	Greg Rodgers	
Office Address:	2715 Bosque Circle 2-202	
	Melbourne FL	, Florida <u>32940</u>
	(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.

Geg Rodge (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 Name: \_\_\_\_ Chairman □ Chairman Address: \_\_\_\_\_ ☐ Vice Chairman □ Vice Chairman Address: \_\_\_\_\_ Ivy Hubler □ Director ■ Director □ President □President □Vice President □ Vice President □Treasurer □ Secretary □Treasurer □ Secretary Mike Hubler ☐ Other \_\_\_\_\_\_ □Other \_\_\_\_\_ **■**Other <u>'''</u> □Other \_\_\_\_\_ Name: □ Chairman □ Chairman Name: \_\_\_\_\_\_ Address: \_\_\_\_\_\_ □ Vice Chairman Director Director □President □ President ☐ Vice President ☐ Vice President \_\_\_\_\_ □ Treasurer □ Secretary □ Treasurer □ Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Chairman Name: \_\_\_\_\_\_ Name: \_\_\_\_\_\_\_ □ Chairman □ Vice Chairman Address: □ Vice Chairman Address: \_\_\_\_\_\_ □ Director □Director □ President □ President □Vice President □Vice President \_\_\_\_\_ ☐ Treasurer ☐ Secretary □ 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. 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. Ivy Hubler

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Tektonux LLC was formed in Madison County, Alabama on March 18, 2019. The Alabama Entity Identification number for this entity is 547-261. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

03/01/2021

Date

X 24. Merill

John H. Merrill

Secretary of State