# F21100001555

(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;





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25.00

2/20/91



# 11836 Blue Hill Trail Bradenton, FL 34211

# Phone: 678.777.4721 dkendrick@mycorporateparalegal.com

March 5, 2021

### SENT VIA OVERNIGHT DELIVERY

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street Suite 810 Tallahassee, FL 32303

·

Re: Application by Foreign Corporation for Authorization to Transact Business in Florida – Quantum Solutions Software, Inc.

Dear Sir or Madam:

Enclosed please find the following:

- 1. Application by Foreign Corporation for Authorization to Transact Business in Florida for Quantum Solutions Software, Inc.;
- 2. Certificate of Good Standing issued by the Secretary of State of Delaware; and
- 3. My firm's check in the amount of \$87.50 to cover the requisite filing. Certified Copy and Certificate of Status fees.

If you would please file the above Application for Certificate of Authority and return evidence to my attention at the address listed here and on the cover letter with an email confirmation to my attention at <a href="mailto:dkendrick@mycorporateparalegal.com">dkendrick@mycorporateparalegal.com</a>. Please do not hesitate to contact me should you have any questions. Thank you for your prompt attention to this matter.

Kindest regards.

Donna M. Kendrick

Enclosures

# **COVER LETTER**

~				
SUBJECT:	Quantum Solutions Software	e, Inc.		
	Name of cor	poration - must	nclude suffix	
Dear Sir or M	Name of corporation - must include suffix  ir or Madam:  closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," icate of Existence," or "Certificate of Good Standing" and cheek are submitted to register the referenced foreign corporation to transact business in Florida.  return all correspondence concerning this matter to the following:  onna Kendrick  Name of Person  CorporateParalegal.com LLC  Firm/Company  3.4  Address  Addr			
"Certificate o	f Existence," or "Certificate of Go	ood Standing" ar	nd check are sub	
Please return	all correspondence concerning the	is matter to the f	ollowing:	
Donna K	endrick			r-?
	N	Name of Person		
MyCorpo	rateParalegal.com LLC			
	F	irm/Company		1
11836 B	ue Hill Trail			
		Address		:.9
Bradento	on, FL 34211			
	Cit	y/State and Zip o	ode	
dkendri	<b>O</b>			
	E-mail address: (to	be used for futur	e annual report i	notification)
For further in	formation concerning this matter,	, please call:		
Davi	Kandaiat			
at ( <u>0/8</u> )				hana Numbar
ıvam	e of Person A	rea Code	Daytime retep	none inumber
Regis Divis The C 2415	stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810		Registration S Division of Co P.O. Box 632	ection orporations 7
Please make cl	heck payable to: FLORIDA DEPAR ing Fee	e & 🔲 \$78.7.	5 Filing Fee &	

# 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.

	n Solutions Software. Inc.			
	orporation; must include "INCORPORATED." orp." "Inc." "Co," or "Corp.")	" "COMPANY." "CORPORATION."		
me., co., ce	orp. the. Co. or Corp. )			
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting but	siness in Florida)	
Delaware	3.	85-2142919	85-2142919	
(State or country	y under the law of which it is incorporated)	(FEI number, if applica	ble)	
July 13,	2020 5.			
(Date	of incorporation)	(Date of duration, if other than	(Date of duration, if other than perpetual)	
		n Florida, it prior to registration)		
	(SEE SECTIONS 607.1501 & 607.1;	502, F.S., to determine penalty liability)		
1370	O.S. Ocean Blvd. Pompano Beach, FL 33062			
	(Principal offi	ce <u>street</u> address)		
			- 1 2 1. 3	
	(Current mailir	ng address, if different)	• •	
			,	
. Name and <u>stree</u>	<u>et address</u> of Florida registered agent: (P.C	D. Box NOT acceptable)	• •	
Name:	Corporation Service Company		-	
Name.	120111	<del></del>	<i>:</i> :5	
ffice Address:	1201 Hays Street	<del></del>	-	
	Tallahassee	, Florida <sup>32301</sup>		
	(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.

> Corporation Service Company By: Florabell Exterior (Registered agent's signature)

Elizabeth Kitchen, Asst. Secretary

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.

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

### Name: Maria Strollo Zack Stephen Zack ☐ Chairman Name: □Chairman 1370 S. Ocean Blvd. 1370 S. Ocean Blvd. □ Vice Chairman Address: □ Vice Chairman Address: Pompano Beach, FL 33062 Pompano Beach, FL 33062 □ Director ☑Director □ President ☐ Vice President ☐ Vice President Secretary ☐ Treasurer ☐ Secretary Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ □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 □Chairman □ Chairman Name: Name: \_\_\_\_\_ □ Vice Chairman Address: \_\_\_\_\_ Address: \_\_\_\_\_\_ □ Vice Chairman □Director □ Director □ President □ President □Vice President □ Vice President □ Secretary Treasurer ☐ Secretary □Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed ndividuals 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 the is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in i.817.155, F.S. Maria Strollo Zack, President

(Typed or printed name and capacity of person signing application)

A. DIRECTORS



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

DELAWARE, DO HEREBY CERTIFY "QUANTUM SOLUTIONS SOFTWARE, 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 FIRST DAY OF MARCH, A.D.

2021.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QUANTUM"

SOLUTIONS SOFTWARE, INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF

JULY, A.D. 2020.



Authentication: 202624136

Date: 03-01-21

3235963 8300 SR# 20210735506