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	Fax Number	: (850)617-6383
From:		
	Account Name	: C T CORPORATION SYSTEM
	Account Number	: FCA000000023
	Phone	: (614)280-3338
	Fax Number	: (954)208-0845
		s for this business entity to be used for future ngs. Enter only one email address please.**

## FOREIGN PROFIT/NONPROFIT CORPORATION **CSC TEP CO**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Help

16144554862

To: 18506176383

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

7

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.

CSC TEP CO			
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp ")	" "COMPANY," "CORPORATION,"	
(If name mavaila	ible in Florida, enter alternate corporate name	adopted for the purpose of transacting busing	ness in Florida)
Delaware		86-2209094	
(State or country under the law of which it is incorporated) 02/22/2021		(FEI number, if applicable) Perpetual	
4. [Date Upon filing 6.	of incorporation)	(Date of duration, if other than perpetual)	
	(SEE SECTIONS 607,1501 & 607 1 vd., Suite 70, Plainview, NY 11803	n Florida, if prior to registration) 502, F.S., to determine penalty liability) pal office address)	
	(	par office dam coop	<b>3</b> ·
	(Current mail)	ng address, if different)	
8. Name and <u>stree</u> Name;	et address of Florida registered agent: (P. CT Corporation System	O. Box <u>NOT</u> acceptable)	• 5
Office Address:	1200 South Pine Island Road		:
	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.

CT Corporation S	System
CH-CLR Teleprin	Karen Spain Assistant Secretary
 (Registe	red 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.

To: 18506176383

11. Names and business addresses of officers and/or directors:

A. DIRECTORS		
Chairman:		T
Address:		
V		
Vice Chairman:		
Director: Will Sherri	ill	
Address: 303 Sunnys	rside Blvd., Suite 70, Plainview. NY 11803	
Director:		
		<u> </u>
B. OFFICERS		?
Mark Hjel President:	ile	
	side Blvd., Suite 70, Plainview, NY 11803	, -
		• •
		(
Chris Max Secretary:	xie	
•	rside Blvd., Suite 70, Plainview, NY 11803	
Marisa Bu		
	side Blvd., Suite 70, Plainview, NY 11803	
NOTE: If necessar	ry, you may attach agraddendum to the application listing additional officers and/or dir	rectors.
12.		
	Signature of Director or Officer	
are true and that he	ctor signing this document (and who is listed in number 11 above) affirms that the facts or she is aware that false information submitted in a document to the Department of S	
a third degree felon Chris Maxie, Se	ny as provided for in s.817.455, F.S.	
13	·	

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



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

DELAWARE, DO HEREBY CERTIFY "CSC TEP CO" 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 NINETEENTH DAY OF APRIL, A.D. 2021.

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



Justiney W. Budlack, Reconstry of State

Authentication: 203001069