# F2100002735

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

Office Use Only



000364774040

04/30/21--01010--019 \*\*70.00

50 / N DI

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: ArroTech Corporation				
<del></del>		n - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by For "Certificate of Existence," or "Ce above referenced foreign corpora	ertificate of Good Star	nding" and check are submit		
Please return all correspondence of	concerning this matte	r to the following:		
Steve Millaway				
	Name of	Person		
	Firm/Con	npany		
7506 Holley Circle				
	Addr	ress		
Panama City Beach, FL 32408			<u> </u>	
	City/State a	and Zip code	. )	
smillaway@msn.com		· · · · · · · · · · · · · · · · · · ·	. )	
t:-mail	address: (to be used	for future annual report noti	fication) .	
For further information concerning this matter, please call:				
Steve Millaway	850	γ 896-2871		
Name of Person	at ( <u>850</u> Area Cod	/	ne Number	
STREET/COURIER AI Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, S Tallahassee, FL 32303	e	MAILING ADD Registration Sect Division of Corpe P.O. Box 6327 Tallahassee, FL	ion orations	
<del>-</del>	RIDA DEPARTMENT		☐ \$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.

1. ArroTech Corporation							
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp,")						
	(If name unavailable in Florida, en	ter alternate corporate name :	ndopted for the purpose of transacting b	ousiness in Florida)			
2.	Delaware	3.	3. 84-2818337				
	Delaware (State or country under the law of which it is incorporated)		(FEI number, if applicable)				
4.							
(Date of incorporation)			(Date of duration, if other than perpetual)				
6.	6. 03/22/2021						
7		CTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)				
,,			ce <u>street</u> address)				
(Current mailing address, if different)							
8.	Name and street address of Flor	ida registered agent: (P.O	. Box NOT acceptable)	• 1			
	Name: Steve Millaway	11.1					
О	ffice Address: 7506 Holley Circ	de		, ,			
	Panama City Bea	ch	, Florida <u>32408</u>	.•			
		(City)	(Zip code)	. <del>.</del>			

### 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.

(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: Steve Millaway □ Chairman □ Chairman Name: \_\_\_\_\_ □ Vice Chairman Address: PO Box 27835 ☐ Vice Chairman Address: Panama City, FL 32411 ■ Director □Director President □ President □Vice President \_ □ Vice President □ Secretary ☐ Treasurer □ Secretary ☐ Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: \_\_\_\_\_ ☐ Chairman □Chairman Name: □Vice Chairman Address: \_\_\_ □ Vice Chairman Address: □Director □ Director □President □President □Vice President \_\_\_\_\_ □Vice President ☐ Secretary ☐Treasurer ☐ Secretary □Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other Other \_\_\_\_\_ Name: □ Chairman Name: \_\_\_\_\_ ☐ Chairman □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. 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

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

s.817.155, F.S.

13. Steve Millaway



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

DELAWARE, DO HEREBY CERTIFY "ARROTECH 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-FIRST DAY OF APRIL, 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 "ARROTECH CORPORATION" WAS INCORPORATED ON THE TWENTY-FIRST DAY OF AUGUST,

A.D. 2019.

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

Authentication: 203027622

Date: 04-21-21