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COVER LETTER

	istration Section sion of Corporations					
SUBJECT	Solar-Tec Systems, Inc.					
Name of corporation - must include suffix						
Dear Sir or I	Madam:					
"Certificate		of Good Stanc	Authorization to Transact Business in Fling" and check are submitted to registers in Florida.			
Please return	all correspondence concernit	ng this matter	to the following:			
Ed Shaffer						
		Name of F	Person		-	
Solar-Tec Sy:	stems, Inc.					
		Firm/Com	pany		202	
27071 Cabot Road, Suite 111		** . ** **	2021 KA			
Address Laguna Hills, CA 92653			8			
City/State and Zip code				PH 12:		
	E-mail address:	(to be used fo	or future annual report notification)	- 100	3	
For further is	nformation concerning this ma	atter, please ca	ail:			
Ed Shaffer		at (632-6766	_		
Nar	ne of Person	Area Code	Daytime Telephone Number	· -		
Reg Divi The 241:	REET/COURIER ADDRESS istration Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
	a check for the following amo check payable to: FLORIDA DE ling Fee	PARTMENT g Fee &	\$78.75 Filing Fee & S 87.50 Fil	e of Status	&	

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.

ole in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	•
3.	C3189574	
under the law of which it is incorporated)	(FEI number, if applicable)	
5.	Perpetual	
f incorporation)	(Date of duration, if other than perpetual)	
·	502, F.S., to determine penalty liability)	
•	ce <u>street</u> address)	:
	11 'c !'œ	
(Current mailin	ig address, if different)	
address of Florida registered agent: (P.C). Box NOT acceptable)	
Linda Shaffer		
10170 SW 88th Street, Suite 301		10.60 10.00
Miami	Florida 33176	u
(City)	(Zip code)	
it's accentance		
d as registered agent and to accept servi	ce of process for the above stated corporation at the p nent as registered agent and agree to act in this capac elative to the proper and complete performance of my	city. I
	under the law of which it is incorporated) 5. (Date first transacted business in (SEE SECTIONS 607.1501 & 607.1501 eet, Suite 301 (Principal officer, Suite 301) (Current mailing address of Florida registered agent: (P.C. Linda Shaffer 10170 SW 88th Street, Suite 301 Miami (City) 11's acceptance: d as registered agent and to accept service.	under the law of which it is incorporated) 5. Perpetual (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) eet, Suite 301 (Principal office street address) (Current mailing address, if different) address of Florida registered agent: (P.O. Box NOT acceptable) Linda Shaffer 10170 SW 88th Street, Suite 301 Miami , Florida (City) At s acceptance: d as registered agent and to accept service of process for the above stated corporation at the process for the

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	·					
Chairman	Ed Shaffer Name:	□Chairman	Linda Shaffer Name:			
□Vice Chairman	Address:	□Vice Chairman	Address: 10170 SW 88th Street, Miami, Flo			
Director	33971-A Silver Lagten	7 □Director	1017054 88 457			
President	Dana Point A		17:921 F/ 3517			
□Vice President	92 Cd	9 □Vice President				
Secretary	☐ Treasurer	■ Secretary	□Treasurer			
□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	Name:	□Chairman	Name: 20 77 80 Address: 0 10 10 10 10 10 10 10 10 10 10 10 10 1			
Director	<u> </u>	□Director	17. N. 17			
□President		□President	39			
□Vice President		□Vice President				
Secretary	□Treasurer	Secretary	□Treasurer			
Other	□Other	Other	Other			
individuals may be	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department	nt of State Annual Re	eport form.			
12. Signature of Director or Officer						
The officer or direc	ctor signing this document (and who is listed in number also information submitted in a document to the Depart	r 11 above) affirms th	nat the facts stated herein are true and that he or			



I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name:

SOLAR-TEC SYSTEMS, INC.

File Number:

C3189574

Registration Date:

02/09/2009

Entity Type:

DOMESTIC STOCK CORPORATION

Jurisdiction:

CALIFORNIA

Status:

ACTIVE (GOOD STANDING)

As of May 14, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 15, 2021.

SHIRLEY N. WEBER, Ph.D. Secretary of State

Certificate Verification Number: RGEMPVZ

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at bebizfile.sos.ca.gov/certification/index.