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DATE: 6/14/2021

NAME: GROUND UP, INC

**TYPE OF FILING:** APPLICATION

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

1:05

## **COVER LETTER**

.

TO: Registration Section Division of Corporations

SUBJECT: GROUND UP. INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

	Name of	Person	
First Corporate Solutions Inc.			. 20
	Firm/Con	npany	
914 S S Street			
	Addr	ess	
Sacramento, CA 95811			PR ST
	City/State a	nd Zip code	
raservices@ficoso.com	,	·	1102
E-mail addres	s: (to be used	for future annual report	
Name of Person	at ( Area Cod	) e Daytime Telep	hone Number
Name of Person STREET/COURIER ADDRES Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	Area Cod	) e Daytime Telep MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	DDRESS: Section orporations 7

### 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.

	orporation; must include "INCORPORATED,"	COMPANY," "CORPORATIO	N,"
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")		
Ground Up Mo	orsports Inc.		
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transactin	ig business in Florida)
Connecticut	3		
(State or countr	y under the law of which it is incorporated)	(FEI number, if ap	plicable)
8/9/2004	5.		
(Date	of incorporation) 5	(Date of duration, if other	than perpetual)
	(Date first transacted business in F		
OL OPEAT UNI	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liabili	ity)
	. ROAD, NAUGATUCK. CT, 06770		
OL CREAT HEL	(Principal office ROAD, NAUGATUCK, CT, 06770	<u>street</u> address)	2021
		uddress, if different)	
	(Current maning a	adress, ir amereni)	· · · · · · · · · · · · · · · · · · ·
Nama and etro	at address of Florida registered agent: (P.O. I	Rox NOT acceptable)	
. Name and <u>stree</u>	First Corporate Solutions, Inc.	Jox <u>NOT</u> acceptable)	PR
Name:		-	
ffice Address:	155 Office Plaza Drive		05
	Tallahassee	. 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.

(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.

#### DocuSign Envelope ID: 84A82F78-829E-44D7-AD44-BBC8B8950BF2

A. DIRECTORS	· · · · ·			
□ Chairman	KENNETH SANTORO	Chairman Name:		
⊡Vice Chairman	91 GREAT HILL ROAD,	□Vice Chairman	91 GREAT HILL ROAD.	
Director	NAUGATUCK, CT, 06770	Director		
President		□President		
□Vice President		DVice President		
	Treasurer	Secretary	Treasurer	
□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	· · · · ·	
Chairman	Name:	Chairman	Name:	
□Vice Chairman	Address:		Address:	
Director		Director	• ••	
President		President		
□Vice President		□Vice President		
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.

	DocuSigned by:
12	Elizabeth Sautara
<u>_</u>	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 \$.817.155, F.S.

Owner

	Elizabeth	Santoro	
13			

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

I, the Secretary of The State of Connecticut, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

#### GROUND UP, INC.

a domestic STOCK corporation, was filed in this office on August 09, 2004.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

in Mente

Secretary of The State of Connecticut

Date Issued: June 14, 2021

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