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**F2100003286**

Division of Corporations  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (608)827-5300  
Fax Number : (608)827-5501

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: sarah@ascentagroup.com

## FOREIGN PROFIT/NONPROFIT CORPORATION

Optimum Level Solutions Inc.

Certificate of Status	0
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**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. Optimum Level Solutions Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Wyoming

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. 2/20/2020

(Date of incorporation)

5.

Perpetual

(Date of duration, if other than perpetual)

6. Upon qualification

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6750 Royal Palm Blvd Apt 102, Margate, Florida 33063

(Principal office street address)

5590 NW 61st ST Coconut Creek, FL 33073 Apt 8

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Business Filings Incorporated

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(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.

*Mark Williams*

Mark Williams, AVP, Business Filings Incorporated

(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.

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

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## A. DIRECTORS

☐ Chairman Name: Angelo Davato

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director 6750 Royal Palm Blvd Apt 102

☒ President Margate, Florida 33063

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Angelo Davato

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director 6750 Royal Palm Blvd Apt 102

☐ President Margate, Florida, 33063

☒ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Angelo Davato

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director 6750 Royal Palm Blvd Apt 102

☐ President Margate, Florida 33063

☐ Vice President \_\_\_\_\_

☒ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Angelo Davato

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director 6750 Royal Palm Blvd, Apt 102

☐ President Margate, Florida 33063

☐ Vice President \_\_\_\_\_

☐ Secretary ☒ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Angelo Davato

☐ Vice Chairman Address: \_\_\_\_\_

☒ Director 6750 Royal Palm Blvd, Apt 102

☐ President Margate, Florida 33063

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_

☐ Vice Chairman Address: \_\_\_\_\_

☐ Director \_\_\_\_\_

☐ President \_\_\_\_\_

☐ Vice President \_\_\_\_\_

☐ 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 individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Angelo Davato 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 s.817.155, F.S.

13. Angelo Davato, President  
(Typed or printed name and capacity of person signing application)

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**STATE OF WYOMING**  
**Office of the Secretary of State**

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

**Optimum Level Solutions**  
is a  
**Profit Corporation**

formed or qualified under the laws of Wyoming did on **February 20, 2020**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2020-000901515**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 15th day of June, 2021 at 10:15 AM. This certificate is assigned ID Number 045224330.



*Edward A. Buchanan*  
Secretary of State

2021 JUN 15 AM 11:03  
FILED  
CLERK OF COURT  
JUDICIAL DEPT.  
STATE OF WYOMING  
CHEYENNE, WY.