F21000003516

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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05/13/21--01023--006 **79.00



'JUN 24 2021 M. SOLOMON

COVER LETTER			
TO: Registration Section			
Division of Corporations			
SUBJECT: USA Assembly: Name of corporation - in	TNC.		
Name of corporation - in	ust include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Auth "Certificate of Existence," or "Certificate of Good Standing above referenced foreign corporation to transact business in	" and check are submitted to register the		
Please return all correspondence concerning this matter to the	ne following:		
Frie Roscoe.	Ir .		
Name of Person	on S		
USA A granble	ATM S		
Firm/Company	ITNC.		
	Air Tay		
2341 NW 60 Address			
Synrise, FL	33313 ST		
City/State and Zi			
	•		
E-mail address: (to be used for fu	Mil (form		
	tare annual report notification)		
For further information concerning this matter, please call:			
Name of Person Area Code Name of Person	871-6917		
Mane of Ferson Alea Code	Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations The Centre of Tallahassee	Division of Corporations P.O. Box 6327		
2415 N. Monroe Street, Suite 810	Tallahassee, FL 32314		
Tallahassee, FL 32303			
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF S	TATE		
T 420 00 70 11 12 15 15 15 15 15 15 15 15 15 15 15 15 15	.75 Filing Fee & S87.50 Filing Fee,		

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.

(If name unavaile	•	adopted for the purpose of transacting business in Fl	lorida)	
(State or country	Montana 3. Late or country under the law of which it is incorporated) (FEI number, if applicable)			
(Date	(Date of incorporation) [Date of duration, if other than perpetual)			
6	May 6, 2021	n Florida, if prior to registration)		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7	2341 NW	both Ter Sumbe, R 33313		
	(Principal offi	cc <u>street</u> address)		
	(Current mailin	g address, if different)	2921	
-EV	(Curem manin	g address, if different		
8. Name and stree	t_address of Florida registered agent: (P.C). Box <u>NOT</u> acceptable)	123	
Name:	FILL ROSCOE Or	 -	JUN 23 PH I2: 5	
Office Address:	Pampani Beach (City)		15. 2 17. 12 12: 2	
	Pempane Beach	Florida 33060	';', '	
	(City)	(Zip code)		
designated in this further agree to co	ed as registered agent and to accept servi application, I hereby accept the appointn	ce of process for the above stated corporation of the nent as registered agent and agree to act in this elative to the proper and complete performance sition as registered agent.	s capacity. I	

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.

(Registered agent's signature)

A. DIRECTORS						
□Chairman	Name: Fric RUSICE Jr	□Chairman	Name:			
□Vice Chairman	Address: 143 NW 1314, SI Apl 6	□Vice Chairman	Address:			
ZiDirector	Pompano Beach : FC 33000	□Director				
President		□ President				
□Vice President	***************************************	□ Vice President			· · · · ·	
M Secretary	⊡ Treasurer	☐ Secretary		□Treasurer		
BOther Owner	Other	Other		□Other		
□Chainnan	Name:	□ Chairman	Name:	<u></u>		
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President			<u> </u>	2921
□Vice President		□Vice President				
Secretary	Treasurer	Secretary		□Treasurer	:4° ×	23
□Other	Other	□Other	<u>.</u>	□Other		P# 12:
□Chairman	Name:	□ Chairman	Name:		$\mathbb{D}_{t^{-1}}$	ଥା
□Vice Chairman	Address:	□Vice Chairman	Address:			
☐Director		Director				
□President		□President				
□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 of Director	nent of State Annual Re	port form.	ourposes only. No		

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.



CERTIFICATE OF EXISTENCE

I, CHRISTI JACOBSEN, Secretary of State for the State of Montana, do hereby certify that:

USA ASSEMBLY, INC.

duly filed its System Amendment in this office on February 2, 2017, and on that date was authorized to transact business in this state for a term of perpetual duration.

Payment is reflected in the records of the Secretary of State for all fees owed to the Secretary of State.

The most recent annual report has been filed with this office.

No articles of dissolution have been placed on the record in this office by said corporation and the records indicate the corporation is in good standing under the laws of the State of Montana.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on the tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 19th day of April, 2021.

Christi Gacolismo

Christi Jacobsen

Montana Secretary of State

Certificate Number: 11018516



June 8, 2021

ERIC ROSCOE JR USA ASSEMBLY INC 2341 NW 60TH TER SUNRISE, FL 33313

SUBJECT: USA ASSEMBLY, INC. Ref. Number: W21000083321

We have received your document for USA ASSEMBLY, INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Recht 2

Letter Number: 521A00012547