F 21000005456

(Requestor's Name)					
(Address)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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2021 SEP 20 PH 1: 03

COVER LETTER

	stration Section sion of Corporations			
SUBJECT:	Mod Exposure, Inc.			
	Name	of corporation	- must include suffix	
Dear Sir or M	1adam:			
"Certificate of	"Application by Foreign C of Existence," or "Certifican need foreign corporation to	e of Good Stan	ding" and check are subi	
Please return	all correspondence concer-	ning this matter	to the following:	
Samantha Jack	kson			
		Name of	Person	
Meriam Corpo	orate Services, Inc.			
	-	Firm/Com	pany	
PO Box 52588	S			
		Addro	ess	
Mesa AZ 852	08			
meriamfinanc	ial@gmail.com	City/State a	nd Zip code	
		ss: (to be used f	or future annual report n	otification)
For further in	formation concerning this	matter, please c	all:	
Samantha Jacl	antha Jackson 720 318.8456			
Nam	ne of Person	Area Code	e Daytime Telepl	none Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration So Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	check for the following an neck payable to: FLORIDA I ing Fee \$78.75 Fili Certificate	DEPARTMENT ng Fee &	OF STATE I \$78.75 Filing Fee & Certified Copy	S87.50 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. Mod Exposure,			
	orporation; must include "INCORPORATED," orp," "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION	ζ."
(If name unavails	able in Florida, enter alternate corporate name a	dopted for the purpose of transactin	g business in Florida)
Georgia	3.	(FEI number, it applicable)	
	y under the law of which it is incorporated)	(FEI number, if applicable)	
01/08/2021	of incorporation) 5.	(Date of duration, if other t	·
(Date	of incorporation)	(Date of duration, if other t	than perpetual)
j			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15)	Florida, if prior to registration) 02, F.S., to determine penalty liabili	ty)
, 14333 Beach Blv	d Ste 33 Jacksonville FL 32250		
·		e street address)	
2400 Herodian W	Vay SE Ste 140 Smyrna GA 30080		
	(Current mailing	address, if different)	
	et address of Florida registered agent: (P.O Natalie Nimeh	. Box <u>NOT</u> acceptable)	2021 SET
Name:			P 20 PH 1: 03
Office Address:	14333 Beach Blvd Ste 33		- T
	Jacksonville	Florida	
	(City)	(Zip code)	TA O
. Registered age	ent's acceptance:		' m w
Having been nam	ed as registered agent and to accept servic		
	application, I hereby accept the appointm omply with the provisions of all statutes re		
ind I am familiar	with and accept the obligations of my pos	ition as registered agent.	e perjormance of my auto
1	idelland		
$\overline{\mathcal{D}}$	(Registered agent's sig	nature)	

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 Natalie Nimeh □Chairman □Chairman Name: _____ 14333 Beach Blvd Ste 33 ☐Vice Chairman Address: □Vice Chairman Address: _____ Jacksonville FL 32250 **■**Director □Director President □President □ Vice President □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: _____ □Vice Chairman Address: _____ □Vice Chairman Address: □ Director □ Director □President □President □Vice President _____ □Vice President □ Secretary ☐Treasurer ☐ Secretary □Treasurer □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 s.817.155, F.S. Natalie Nimeh, President

Control Number: 21007355

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

1, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Mod Exposure, Inc.
a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 21841796 Date Inc/Auth/Filed: 01/08/2021 Jurisdiction : Georgia Print Date : 09/15/2021

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State