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OCT 20 2021 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corpora				
SUBJECT: Phoenix Integ	ratedylne			
30bjEc1.	Name of corporation -	must include suffix		
Dear Sir or Madam:				
"Certificate of Existence," of	by Foreign Corporation for Au or "Certificate of Good Standi orporation to transact business	ng" and check are submi		
Please return all correspond	ence concerning this matter to	the following:		
Manuel Soliz				
	Name of Pe	rson		
Phoenix Integrated Inc				
	Firm/Compa	iny		
11031 Wye Dr. Ste #118				
	Address		7921	
San Antonio, Tx. 78217			130	
	City/State and	Zip code	9	
msoliz1@phoenixintegratedin	c.com		flication)	
I.	-mail address: (to be used for	future annual report not	fication) is	
For further information con-	cerning this matter, please call	:	5 -	
Manuel Soliz	at (210	325-7990		
Name of Person	Area Code	Daytime Telephor	ne Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	FLORIDA DEPARTMENT O \$78.75 Filing Fee & □ S		■ \$87.50 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.

Phoenix Integra			<u>. </u>
•	-	adopted for the purpose of transacting business in Florid	a)
Texas	208559258 (FEI number, if applicable)		
(State or counti	ry under the law of which it is incorporated)	(FEI number, if applicable)	
4. 02/14/2007	5.		
(Date	of incorporation)	(Date of duration, if other than perpetual)	
6.			
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7 11031 Wye Dr S	te#118, San Antonio, Tx. 78217		
··		fice street address)	
	(Current maili	ng address, if different)	_
		≫ , -	20
8. Name and street	et address of Florida registered agent; (P.	O. Box <u>NOT</u> acceptable)	21 0
Name:	Donald N. Bowles		<u>-</u>
000 11	2944 Water View Circle		2021 OCT 19 Kh12: 51
Office Address:			<u> </u>
	Orange Park	, Florida	15
	(City)	(Zip code)	<u></u>
9. Registered ag	ent's acceptance:		
Having been nan	ied as registered agent and to accept serv	ice of process for the above stated corporation at th	
		ment as registered agent and agree to act in this ca relative to the proper and complete performance of	
	r with and accept the obligations of my po		my unnes,
•	. , , , , , , , , , , , , , , , , , , ,		
	Towald N. Roulas		
_	Dun and N Book es Sep 11 (2021 11 (3910)		
	(Registered agent's 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.

A. DIRECTORS	,				
□Chairman	Name: Manuel Soliz III	□Chairman	Name: Manuel Soliz III 16315 Elk Hollow Address:		
□Vice Chairman	Address:	☐ Vice Chairman			
□Director	San Antonio, Tx. 78247	□Director		o, Tx. 78247	
■ President		□President			
□Vice President		■ Vice President			
□Secretary	□Treasurer	☐ Secretary		□Treasurer	
□Other		Other		□Other	
□Chairman □Vice Chairman	Name: Kelly Soliz 16315 Elk Hollow Address:	□Chairman □Vice Chairman			
Director	San Antonio, Tx. 78247	Director			
□President		□President			
□ Vice President		□Vice President		<u>.</u>	<u> </u>
■ Secretary	☐ Treasurer	Secretary		□Treasurer	
□Other	Other	Other		□Other <u>·</u>	2021
□Chairman	Name:	□Chairman	Name:		21 OCT 19
□ Vice Chairman	Address:			,; -	
Director		□Director		, ,	<u> </u>
□President		□President			<u></u>
□Vice President		□Vice President			
Secretary	□Treasurer	☐ Secretary		□Treasurer	
□Other	Other	Other		□Other	
individuals may be a	se an attachment to report more than six (6). The added to the index when filing your Florida Depart Soliz A Signature of Directors	attachment will be imaged tment of State Annual Rep or or Officer	ort form.		ı-indexed
The officer or directes she is aware that fals s.817.155, F.S.	or signing this document (and who is listed in number information submitted in a document to the Dep	iber 11 above) affirms that eartment of State constitute	the facts states a third degr	ed herein are true a rec felony as provid	nd that he or ed for in
B. Manuel Soliz	lli				

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Deputy Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for PHOENIX INTEGRATED, INC (file number 800774421), a Domestic For-Profit Corporation, was filed in this office on February 14, 2007.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 12, 2021.



Jose A. Esparza Deputy Secretary of State



October 5, 2021

MANUEL SOLIZ 11031 WYE DR. STE #118 SAN ANTONIO, TX 78217

SUBJECT: PHOENIX INTEGRATED INC

Ref. Number: W21000132774

We have received your document for PHOENIX INTEGRATED INC and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The officer Manuel Soliz III is not listed in the Directors listing, unless the "III" was left off. Please correct

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

RECEIVED

Letter Number: 421A00024164