F210006212

(Requestor's Name)					
(Address)					
(Address)					
(
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Leigh					

Office Use Only



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OCT 27 2021 M. SOLOMON

COVER LETTER

	ration Section on of Corporations			
SUBJECT:	Gudpod Corp.			
	Name of corpor	ation - m	nust include suffix	
Dear Sir or Ma	dam:			
"Certificate of	Application by Foreign Corporation Existence," or "Certificate of Good ed foreign corporation to transact by	Standing	g" and check are submitte	usiness in Florida," ed to register the
Please return a	ll correspondence concerning this m	atter to t	the following:	
	Shanı	ion Mass	sena	
	Nam	e of Pers	son	
	Gudpo	od Corp.		eric \$
	Firm/	Compan	у	
	3160:	5 N 171 A	Ave	C
	A	Address		13.7
	Surpri	se, AZ 8	35387	· (· · · · · · · · · · · · · · · · · ·
	City/St.	ate and Z	Cip code	
	accou	nting@g	udpod.com	
	E-mail address: (to be u	sed for fi	uture annual report notifi	cation)
For further info	ormation concerning this matter, plea	ase call:		
Shannon Mass	ut (000		358-8572	·
Name	of Person Area	Code	Daytime Telephone	Number
Registr Divisio The Ce 2415 N	ET/COURIER ADDRESS: ration Section on of Corporations entre of Tallahassee I. Monroe Street, Suite 810 assee, FL 32303		MAILING ADDR Registration Section Division of Corport P.O. Box 6327 Tallahassee, FL 32	n rations
	neck for the following amount: ck payable to: FLORIDA DEPARTM: g Fee	□ \$78		\$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.

) <u>. </u>		
corporation; must include "INCORPORATED," Corp." "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
lable in Florida, enter alternate corporate name ad	lopted for the purpose of transacting business	in Florida)
<u>A</u> 3	45-5143521	
ry under the law of which it is incorporated)	(FEI number, if applicable)	
2012		
e of incorporation)	(Date of duration, if other than perpetual)	
	r · · r · ·	,
15 Little Brook Ln Ste C, Newbu (Principal office	rgh, NY 12550 street address)	
(Current mailing a	address, if different)	. ~
et address of Florida registered agent: (P.O. F Capitol Capital Corporate Services, Inc	Box <u>NOT acceptable</u>)	121 EL 25 E
515 E Park Ave, Ste B, Second Floor		
515 BT and Ave. Ste D. Second Proof	-	
	Florida <u>32</u> 301	-
	Corporation; must include "INCORPORATED." Corp." "Inc," "Co," or "Corp.") lable in Florida, enter alternate corporate name ad A	corporation; must include "INCORPORATED," "COMPANY." "CORPORATION," Corp." "Inc," "Co," or "Corp.") lable in Florida, enter alternate corporate name adopted for the purpose of transacting business A

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.

Leigh Johnson, Asst. Secretary on behalf of Capitol Corporate Services, Inc.

(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.

A. DIRECTORS Gian Carlo Ochoa Christopher Rohde Chairman ☐ Chairman 15 E Little Brook Ln Ste C Newburgh 75 Honey Hill Rd, Wilton, CT 0689 □Vice Chairman Address: □ Vice Chairman ☐ Director □Director □President □President □Vice President □ Vice President ☐ Secretary ☐ Treasurer □ Secretary ☐ Treasurer Other CEO ☐Other _____ ☐Other _____ □Other Tony Campbell □ Chairman Name: □ Chairman Address: ______15 E Little Brook Ln Ste C New burg □Vice Chairman ☐ Vice Chairman Address: **■**Director □ Director □President □ President ☐ Vice President ☐ Vice President □ Secretary □Treasurer ☐ Secretary □ Treasurer □Other _____ □Other _____ ☐ Chairman Name: Chairman □ Vice Chairman Address: ____ □Vice Chairman Address: _____ □Director □ Director □President □President □Vice President ___ ☐ Vice President ☐ Secretary □Treasurer □ 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. Christopher J. Rohde_ 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. Christopher Rohde - CEO

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





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GUDPOD CORP." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE EIGHTH DAY OF JULY, A.D. 2021.



Authentication: 203623855

Date: 07-08-21



October 5, 2021

SHANNON MASSENA GUDPOD CORP. 31605 N 171 AVE SURPRISE, AZ 85387

SUBJECT: GUDPOD CORP. Ref. Number: W21000132779

We have received your document for GUDPOD CORP, 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):

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

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

Mel Solomon Senior Section Administrator

Letter Number: 721A00024164

10-19-21 Spelling error corrected as directed.

RECEIVED