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S. HAWKES

COVER LETTER

	stration Section sion of Corporations			
SUBJECT:	RCR Technology Corporation			
00000000	Name o	f corporation -	must include suffix	
Dear Sir or M	fadam:			
"Certificate o	"Application by Foreign Conf Existence," or "Certificate acced foreign corporation to tra	of Good Stand	ing" and check are subr	
Please return	all correspondence concernir	ng this matter t	o the following:	
Robert Reed				
	•	Name of P	erson	
RCR Technolo	ogy Corporation			
		Firm/Comp	any	
9450 N. Merid	lian Street, Suite 300			
		Addres	S	
Indianapolis, I	N 46260			
		City/State and	d Zip code	
rcradmingroup	@rcrtechnology.com V			
	E-mail address:	(to be used fo	r future annual report n	otification)
For further in	formation concerning this ma	atter, please ca	11:	
Audrey Brown	1	317) 624-9500 ext. 7120 Daytime Teleph	
Nam	ne of Person	Area Code	Daytime Teleph	none 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	
	check for the following amoreck payable to: FLORIDA DE ing Fee	PARTMENT (g Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	\$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.

orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"		
able in Florida, enter alternate corporate name	adopted for the purpose of transacting busines	ss in Florida)	
3	35-2019249		
y under the law of which it is incorporated)	(FEI number, if applicable)		
5	Perpetual		
of incorporation)	(Date of duration, if other than perpetual)		
Street, Suite 300, Indianapolis, IN 46260			
	fice street address)		
(Current maili	ng address, if different)		
et address of Florida registered agent: (P. Robert Reed	O. Box <u>NOT</u> acceptable)		
220 108th Avenue, Suite 402			
Treasure Island	Florida 33706		
(City)	(Zip code)		
	ice of process for the above stated corpor ment as registered agent and agree to act		
	(Date first transacted business is (SEE SECTIONS 607.1501 & 607.1 in Street, Suite 300, Indianapolis, IN 46260 (Principal off (Current mailion et address of Florida registered agent: (P. Robert Reed 220 108th Avenue, Suite 402 Treasure Island (City)	(Date of duration, if other than perpose of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Street, Suite 300, Indianapolis, IN 46260 (Principal office street address) (Current mailing address, if different) et address of Florida registered agent: (P.O. Box NOT acceptable) Robert Reed 220 108th Avenue, Suite 402 Treasure Island (City) Florida 33706 (Zip code)	

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

under the law of which it is incorporated.

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

A. DIRECTORS Robert Reed Alison Duane □ Chairman Name: □Chairman Name: 12240 Talon Trace, 9450 N. Meridian Street, Ste 300, ☐ Vice Chairman Address: □Vice Chairman Address: Fishers, IN 46037 Indianapolis, IN 46260 □ Director □ Director President □ President ☐Vice President □ Vice President □Secretary □Treasurer □ Secretary □ Treasurer Other □Other Other Sharon Robinson - Reed □ Chairman ☐ Chairman Name: 12240 Talon Trace, ☐ Vice Chairman Address: □Vice Chairman Address: Fishers, IN 46037 Director Director □ President □President □Vice President __ ☐Vice President □Secretary □Treasurer ☐ Secretary □ Treasurer Other 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 ____ 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.

Robert Reed, President & CEO

State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, HOLLI SULLIVAN, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

RCR TECHNOLOGY CORPORATION

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on May 07, 1997, and was in existence or authorized to transact business in the State of Indiana on December 01, 2021.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, December 01, 2021

olli Sullina

HOLLI SULLIVAN
SECRETARY OF STATE





December 10, 2021

ROBERT REED 9450 N MERIDIAN STREET SUITE 300 INDIANAPOLIS, IN 46260

Having fulfilled the requirements of section 607.1503 or 617.1503, Florida Statutes, on December 9, 2021, this Certificate of Authority is hereby issued to RCR TECHNOLOGY CORPORATION, an Indiana corporation, in accordance with said statute and assigned document number F21000007054. Please refer to this number whenever corresponding with this office.

The certification you requested is enclosed.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Apply today with the IRS online at:

https://sa.www4.irs.gov/modiein/individual/index.jsp.

Please notify this offfice if the corporate address changes.

Should you have any questions regarding this matter, please contact this office at (850) 245-6051.

Letter Number: 021A00029762

Suzanne Hawkes Regulatory II Foreign Registration Division of Corporations

www.sunbiz.org