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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

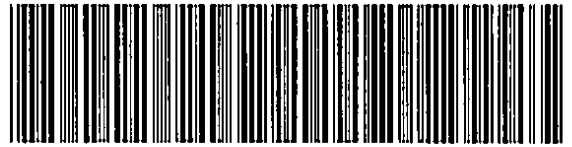
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PLATFORM 1440, INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CHRISTINE WILKAS
Name of Person

P1440
Firm/Company

500 EARLE LN.
Address

Redondo Beach, CA 90278
City/State and Zip code

CHRISTINE@P1440.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRISTINE WILKAS at (310) 930-5974
Name of Person Area Code Daytime Telephone 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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

You cashed the first check for \$160 -
Please send the difference BACK TO
ME - INFO ABOVE.

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

A. DIRECTORS

☒ Chairman	Name: <u>KERRI WALSH JENNINGS</u>	☐ Chairman	Name: <u>CASEY JENNINGS</u>
☐ Vice Chairman	Address: <u>930 TAHOE BLVD.</u>	☐ Vice Chairman	Address: <u>930 TAHOE BLVD.</u>
☐ Director	<u>Suite 802 #744</u>	☒ Director	<u>Suite 802 #744</u>
☐ President	<u>INCLINE Village, NV</u>	☐ President	<u>INCLINE Village, NV</u>
☐ Vice President	<u>89451</u>	☐ Vice President	<u>89451</u>
☐ Secretary	☐ Treasurer	☐ Secretary	☐ Treasurer
☐ Other _____	☐ Other _____	☒ Other _____	☐ Other _____

☐ Chairman	Name: <u>THERESIA GOWW</u>	☐ Chairman	Name: <u>ANNA ZOENOSA</u>
☐ Vice Chairman	Address: <u>471 EMERSON ST.</u>	☐ Vice Chairman	Address: <u>1131 OXFORD ROAD</u>
☒ Director	<u>PAZO ARTO, CA 94301</u>	☒ Director	<u>Burlingame, CA 940</u>
☐ President	_____	☐ President	_____
☐ Vice President	_____	☐ Vice President	_____
☐ Secretary	☐ Treasurer	☐ Secretary	☐ Treasurer
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____

☐ Chairman	Name: <u>KASIA MAYS</u>	☐ Chairman	Name: _____
☐ Vice Chairman	Address: <u>34145 PCH</u>	☐ Vice Chairman	Address: _____
☒ Director	<u>DANA POINT, CA</u>	☐ Director	_____
☐ President	<u>92629</u>	☐ 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 indexed for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. KERRI WALSH JENNINGS
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.

13. KERRI WALSH JENNINGS (Chairman)
(Typed or printed name and capacity of person signing application)



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: PLATFORM 1440, INC.
File Number: C4629604
Registration Date: 08/19/2020
Entity Type: FOREIGN STOCK CORPORATION
Jurisdiction: DELAWARE
Status: ACTIVE (GOOD STANDING)

As of November 10, 2021 (Certification Date), the entity is qualified to transact intrastate business in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of California
this day of November 11, 2021.

A handwritten signature in black ink, appearing to read "Shirley N. Weber".

SHIRLEY N. WEBER, Ph.D.
Secretary of State

Certificate Verification Number: Z2BWBVY

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at bebizfile.sos.ca.gov/certification/index.