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S. ROBERTS

JAN 1 9 2022

COVER LETTER

TO:	Registration Se Division of Co				
SUB.	JECT:	Junction Clou	ıd Connect	ions Inc	
		Name of corpor	ation - mu	st include suffix	
Dear !	Sir or Madam:				
"Certi	ificate of Existenc	tion by Foreign Corporation ce," or "Certificate of Good gn corporation to transact be	Standing*	and check are su	nct Business in Florida," bmitted to register the
Please	return all corres	pondence concerning this m	natter to th	e following:	
		Jeff He	ollingswor	h	
		Nam	e of Perso	1	
		Cliftor	LarsonAll	en, LLP	
		Firm/	'Company		**
		3575 Piedmont Ro	ad, Buildir	ng 15, Suite 1550	
			Address		
		Atlan	ta, GA 301	305	
		City/St	ate and Zip	code	
		AtlantaRAS@	Ticket.CI	AConnect.com	
		E-mail address: (to be u	sed for fut	ure annual report	notification)
For fu	rther information	concerning this matter, ple	ase call:		
	leff Hollingswortl	at (40	4)	793-7269	
	Name of Perso	·	Code	Daytime Telep	hone Number
	CTIVET COL	IDIPO ADDIDOG			
	Registration Se	JRIER ADDRESS: ction		MAILING A Registration S	
	Division of Cor	porations		Division of C	orporations
	Clifton Buildin 2661 Executive			P.O. Box 632	
	Tallahassee, FL			Tallahassee, F	1. 32314
Enclos	sed is a check for	the following amount:			
. 타 \$ 7(0.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		75 Filing Fee & ified 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," "Corp." "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION	**			
(If name unavaila	able in Florida, enter alternate corporate name adop	ted for the purpose of transacting	g business in Florida)			
Delaware	3.	81-5456063				
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)				
02/15/20	<u></u> 5	Pernetual				
(Date	of incorporation)	(Date of duration, if other than perpetual)				
	(Dute first transacted business in Flo					
	(SEE SECTIONS 607.1501 & 607.1502, 1	F.S., to determine penalty liabilit	y)			
	8 The Green, Ste. 8115, Dover, DE 19901					
	(Principal of	Tice address)				
			s 2 5			
	(Current mailing ad	dress, if different)	2022.			
	(Current mailing ad	dress, if different)	2022 JAH SLUP Tall			
Name and stree	(Current mailing ad t address of Florida registered agent: (P.O. Bo	**************************************	2022 JAN 19			
	-	**************************************	7 10			
Name:	t address of Florida registered agent: (P.O. Bo	**************************************	9 AH			
Name:	t address of Florida registered agent: (P.O. Bo	**************************************	7 10			
	cogency Global Inc. 115 North Calhoun Street, Suite 4	**************************************	9 AH 9: Asses:			

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.

Kathy A. Butler, Asst. Sec.

(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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Albert Bunick Address: 8 The Green, Ste. 8115, Dover, DE 19901 Vice Chairman: Joseph Ades_ Address: 8 The Green, Ste. 8115, Dover, DE 19901 Address: Director: __ **B. OFFICERS** President: Albert Bunick Address: 8 The Green, Ste. 8115, Dover, DE 19901 Vice President: Joseph Ades Address: 8 The Green, Ste. 8115, Dover, DE 19901 Secretary: _____ Address: __ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Joseph Ades, COO

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

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "JUNCTION CLOUD CONNECTIONS INC" 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 TWENTY-FIRST DAY OF

DECEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JUNCTION CLOUD CONNECTIONS INC" WAS INCORPORATED ON THE FIFTEENTH DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE
BEEN PAID TO DATE.

Authentication: 205046466

Date: 12-21-21

6317141 8300 SR# 20214173969