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SECRETARY OF STATE

COVER LETTER

_	tration Section ion of Corporations			
SUBJECT:	Ident Branding, Corp			
SOBOLOTI	Name o	of corporation -	must include suffix	
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Stand	ing" and check are subn	
Please return	all correspondence concerni	ng this matter t	o the following:	
Todd Bradley				
		Name of P	erson	_
Ident Branding	, Corp			
		Firm/Comp	any	
3 Thurston Dri	ve			
		Addres	S	
Palm Beach Ga	ardens, FL 33418			
		City/State and	d Zip code	
tkbrad l@yaho				
	E-mail address	: (to be used fo	r future annual report no	otification)
For further in	formation concerning this m	atter, please ca	11:	
Todd Bradley		at () 632-0957		
Name	e of Person	Area Code	Daytime Teleph	one Number
Regis Divis The C 2415	tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations
	check for the following amoveck payable to: FLORIDA DI ing Fee	EPARTMENT (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.

Ident Branding,	Corp			
(Enter name of co	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		
Indent Branding	, Corp			
(If name unavaila	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting business in Flo	orida)	
New Jersey	3.			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
4 03/2000	5			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
6. 01-01-2022				
o	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502			
₇ 3 Thurston Drive	, Palm Beach Gardens, FL 33418			
·	(Principal office	street address)		
 	(Current mailing a	address, if different)		
8. Name and stree	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)		
Name:	Todd Bradley			
Office Address:	3 Thurston Drive			
	Palm Beach Gardens	Florida 33418	•	
	(City)	, Florida Signal Si	2022	
9. Registered age	ent's accentance	22	HA TI	
		of process for the above stated corporation, a	it the place	
designated in this	application, I hereby accept the appointment	nt as registered agent and agree to act in this	capacity. T	
	omply with the provisions of all statutes reli with and accept the obligations of my posit	ntive to the proper and complete performance	of gry didies;	
	1	ORA	ëi 🔘	
	-			
			~	
	(Registored agent's sign	ature)		

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. 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:	□Chairman	Name:	
☐ Vice Chairman	Address: 3 Thurston Drive	□Vice Chairman	Address:	
□Director	Palm Beach Gardens, FL 33418	Director		
President		□President		
□Vice President		□Vice President		
Secretary	Treasurer	☐ Secretary		Treasurer
Other	Other	Other		Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		Director		
☐ President		□President		·
□Vice President		□Vice President		
□Secretary	☐ Treasur e r	Secretary		□Treasurer
□Other	Other	Other		□Other
□ Chairman	Name:	Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		President		
□ Vice President		□Vice President		
Secretary	Treasurer	☐ Secretary		☐ Treasurer
Other	Other	□Other		□Other
Important Notice: Individuals may be	Use an attachment to report more than six (6). The at added to the index when filing your lond a Departr	ttachment will be image ment of State Annual Re	d for reporting p eport form.	ourposes only. Non-indexed
12	Signature of Arecton	T OF OFFICE		
	ctor signing this document (and who is listed in numbers information submitted in a document to the Department of the Department in the De	ber 11 above) affirms th		

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

INDENT BRANDING, CORP. 0100844626

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on March 12, 2001.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

TODD BRADLEY 18 LEDGE ROAD WAYNE, NJ 07470



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 10th day of March, 2022

Sheet Mun

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6129408768

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp