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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

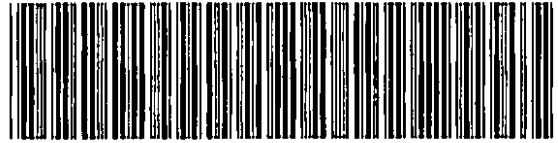
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL-OSPREY, 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:

ADAM W. DILLON

Name of Person

OSPREY SAFETY SOLUTIONS

Firm/Company

19 BOLSAÑA CT

Address

ST. AUGUSTINE, FL 32092

City/State and Zip code

ADAM@OSPREYSAFETY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ADAM W. DILLON

at (336) 543.5335

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

**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.*

1. GLOBAL-OSPREY, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- OSPREY SAFETY SOLUTIONS, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. NORTH CAROLINA 3. 084629178
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 27 AUG 2010 5. NA
(Date of incorporation) (Date of duration, if other than perpetual)
6. NA
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 19 BOLSANA COURT, ST. AUGUSTINE, FLORIDA, 32092
(Principal office street address)
- SAME
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)


Name: ADAM W. DILLON

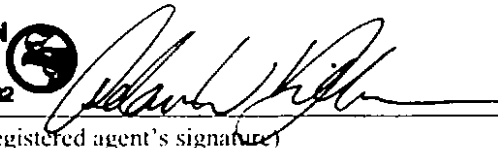
Office Address: 19 BOLSANA COURT

ST. AUGUSTINE, FL , Florida 32092
(City) (Zip code)

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.

ADAM W. DILLON
 **CSP, MPM, OSHP**
OSHA OTI # 18-0107632
BCSP # IEX11458


(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. 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: ADAM W. DILLON

☐ Vice Chairman Address: 19 Bolsona Court

☐ Director Saint Augustine, Florida

☐ President 38096

☐ Vice President

☐ Secretary Treasurer

☐ Other Other

☐ Chairman Name:

☐ Vice Chairman Address:

☐ Director

☐ President

☐ Vice President

☐ Secretary Treasurer

☐ Other Other

☐ Chairman Name:

☐ Vice Chairman Address:

☐ Director

☐ President

☐ Vice President

☐ Secretary Treasurer

☐ Other Other

☐ Chairman Name:

☐ Vice Chairman Address:

☐ Director

☐ President

☐ Vice President

☐ Secretary Treasurer

☐ Other Other

☐ Chairman Name:

☐ Vice Chairman Address:

☐ Director

☐ President

☐ Vice President

☐ Secretary Treasurer

☐ Other Other

☐ Chairman Name:

☐ Vice Chairman Address:

☐ Director

☐ President

☐ Vice President

☐ Secretary Treasurer

☐ Other Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-Florida individuals may be added to the Florida Department of State Annual Report form.

10 ADAM W. DILLON MEM CSP, NPM, OSHP
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the information provided herein is 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 FS 817.155(1)(b).

ADAM W. DILLON
MEM CSP, NPM, OSHP
Typed or printed name and capacity of person signing application



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE

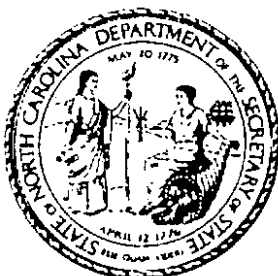
I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

GLOBAL-OSPREY, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 27th day of August, 2010, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 28th day of March, 2022.



Scan to verify online.

Elaine F. Marshall

Secretary of State