

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001866383)))



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To:		
	Division of	Corporations
	Fax Number	: (850)617-6383

From:

Account Name	:	CAPITOL SERVICES,	INC.
Account Number	:	120160000017	
Phone	:	(855)498-5500	
Fax Number	:	(800)432-3622	

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_\_

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# MAY 27 2022

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#### H22000186638

#### **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: Boaming Networks, 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:

Lawrence B. Mandala.

	Nart	ie of Person	
Munck Wilson Mandala, L	LP		
	Firm	/Company	
12770 Coit Road, Suite 600	1		
	······································	Address	
Dallas, TX 75251			
<u>, , , , , , , , , , , , , , , , , , , </u>	City/St	ase and Zip code	
Imandala@munokwilson.co			
<u> </u>	E-mail address: (to be u	used for future annual repo	ort potification)
For further information o	972	ase call: 628-3631	
Name of Person	at (Airca	Code Daytime Te	lephone Number
STREET/COUR Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tailahassee, FL	orations Nahassee Street, Suite 810	Registration Division o P.O. Box (	f Corporations
Enclosed is a check for the Please make check payable \$70.00 Filing Fee	te following amount: to: FLORIDA DEPARTM [] \$78.75 Filing Fee & Certificate of Status	LENT OF STATE	& [] \$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 & FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

		17.0543650
25	3. y under the law of which it is incorporated)	12-0543659 (FEI tamber, if applicable)
	A mitter fue tax of writes it is incorbonated)	(FEI tamora, H apparater)
6/2017	of incorporation) 5.	(Date of duration, if other than perpetual)
(Date	of theoreport(op)	(Date of duration, it other official perpetition)
	(Date first transacted business i (SEB SECTIONS 607.1501 & 607.)	n Florida, if prior to registration) 502, F.S., to determine penalty liability)
Village Cre		
	ch Road, Ft. Worth, TX 76119 (Principal off	ice storiet address)
	(Constant mail)	ig address, tf different)
a and crea	et address of Florida registered agent: (P.C	) Box NOT eccentable)
ni inte Saise	Capital Corporate Services, Inc.	
Name:		, Plorida <u>32301</u>
Address:	515 East Park Avenue, 2nd Floor	
	Talbhasso	32301
	(City)	, Plorida 32301 (Zip code)
	(0.13)	

(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 Socretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

H-ILEU

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to viz (6) antal]:

#### H22000186638

#### **A. DIRECTORS**

DChuirmán DVice Chairman	Nikola Perrovic Nanz:	CiChalmuzn CiVice Chairman	Name:
Director	Pt. Worth, TX 76119	Director	
OPresident			
Vice President		Vice President	
Secretary	Tomsurer	Scoreting	Treasurer
CEO CEO		80thar	<b>🗆 Obs</b>
OQuintas	Nemo: Rade Vujovic	[]Chairman	Name:
Vice Chaiman	Address:	□Vice Chairman	Address:
Director	FL Worth, TX 781190	Director	
#Presidem		President	
🛛 Vice President	••••	Vice President	
Secretary	Treasurer	Socretary	
1JOthar		30ttar	D'Other
Chairman	None:	Chairman	Name:
DVice Chairman	Address:	🛙 Vice Chairman	Address:
Director	·	Director	<u></u>
President		President	
OVice President		🗇 Vice President	
Scoretary	C) Treasurer	Secretary	CTreasurer
00ther	130ther	[] Other	

Intrortant Notine. 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 Ansual Report furn.

12. \_

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 felory as provided for in a \$17,155, F.S.

13. Nikola Petrovic, CEO, Secretary and Treasurer

/k

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

H22000186638

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



John B. Scott Secretary of State

## Office of the Secretary of State

### **Certificate** of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Roaming Networks Inc. (file number 802823279), a Domestic For-Profit Corporation, was filed in this office on September 26, 2017.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: September 27, 2017

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 25, 2022.



John B. Scott Secretary of State

Come visit us on the internet at https://www.sos.texas.gov/ Fax: (512) 463-5709 TID: 10264

Dial: 7-1-1 for Relay Services Document: 1151410910003

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