F22000004135

	<u> </u>	
(Rec	questor's Name)	
(Add	ress)	
(Add	dress)	· · · · · · · · · · · · · · · · · · ·
(City	//State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	······································

Office Use Only



700388368657

07/01/22--01008 ++70.00

22 JUL -1 AH 8: 22 ZOZZ JUL -1 AH 10: 12

S. ROBERTS
JUL 0 1 2022

COVER LETTER

TO:		ration Section					
SHRJ	ECT:	ADDISON F	LEET, INC.				
5020	201.		Name of	f corporation	- must	include suffix	
Dear S	Sir or Ma	adam:					
"Certif	ficate of	Existence,"		of Good Stand	ling" ar	nd check are sub	ct Business in Florida," omitted to register the
Please	return a	ll correspond	ence concernin	g this matter	to the f	ollowing:	
BREN	T ADDI:	SON					
				Name of I	erson		
				Firm/Comp	pany		
9130 S	. DADE	LAND BLVD.	, STE. 1900				
***			·	Addre	SS		
MIAM	II, FL 33	156					
	-			City/State an	d Zip c	ode	· <u></u>
baddise	on@addi	sonfleet.com					
		F	-mail address:	(to be used fo	or future	e annual report	notification)
For fur	ther inf	ormation con	cerning this ma	tter, please ca	all:		
LISA N	MOODY		а	.t (205-	B173 Daytime Telep	
•	Name	of Person		Area Code		Daytime Telep	hone Number
	Regist Division The Co 2415 N	ration Section on of Corpora entre of Talla	tions hassee reet, Suite 810	:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7
Please 1		ck payable to:	FLORIDA DEF \$78.75 Filing Certificate of	PARTMENT (\$78.75	TE Filing Fee & ed 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.

ADDISON FLEET, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"					
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")				
(If name unavail	able in Florida, enter alternate corporate name ado	nted for the purpose of transacting	business in Florida)		
DELAWARE	_				
(State or country under the law of which it is incorporated) (FEI number		(FEI number, if app	licable)		
05/23/2022					
(Date of incorporation) 5.		(Date of duration, if other than perpetual)			
	(Date first transacted business in Flo				
	(SEE SECTIONS 607.1501 & 607.1502,	F.S., to determine penalty liability	')		
9130 S. DADEL.	AND BLVD., STE. 1900, MIAMI, FL 33156				
	(Principal office s	treet address)			
			282		
	(Current mailing ac	ldress, if different)	ين أي		
		NOT (II)	, j=12		
Name and stree	et address of Florida registered agent: (P.O. B	ox <u>NOT</u> acceptable)	<u> </u>		
Name:	BRENT ADDISON	_	P.		
ffice Address:	9130 S. DADELAND BLVD., STE. 1900		် ့ ထွ		
11100 11001033.	MIAMI	– 33156	22 L		
	(City)	_, Florida (Zip code)			
	(City)	(zap 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.

(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:	□ Chairman	Name:		
□Vice Chairman	Address: 9130 S. Dadeland Blvd.,	□Vice Chairman	Address:		
Director	STE 1900	□Director			
□President	Miami, FL 33156	□President			
□Vice President		☐Vice President			
Secretary	□Treasurer	☐ Secretary	Treasurer		
Other	Other	Other	Other		
□ Director ■ President	Brent H Addison 9130 S. Dadeland Blvd., Address: STE 1900 Miami, FL 33156 □Treasurer □Other	□ Director □ President	Name:Address:		
□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: 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 Annual Report form. 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 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 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 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 of the significant of the sig					
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.					

13reht Addisoh - President
(Typed or printed name and capacity of person signing application)





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

DELAWARE, DO HEREBY CERTIFY "ADDISON FLEET, 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-THIRD DAY OF JUNE, A.D. 2022.

Authentication: 203745209

Date: 06-23-22