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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500

Fax Number : (702)900-2290

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

Email Address: managedreports@incorp.com

FOREIGN PROFIT/NONPROFIT CORPORATION RTD SEALS CORP.

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Help

S. ROBERTS

1/1

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COVER LETTER

TO:	Registration Se Division of Co				
SHR	SUBJECT:		RTD SEALS CORP.		
SOLK	75C1.	Name of	f corporation -	must include suffix	
Dear !	Sir or Madam:				
"Certi	ficate of Existence	tion by Foreign Cor te," or "Certificate of the corporation to tra	of Good Stand	uthorization to Transact I ing" and check are submi in Florida.	Business in Florida," tted to register the
Please	return all corres	pondence concernin	g this matter t	o the following:	
		Patricia Reyes	on behalf of	InCorp Services, Inc	
	~		Name of P	er20u	
		ln:	Corp Servic	es, Inc.	
	-		Firm/Comp	any	
3773 Howard Hughes Pkwy., Suite 500S					
			Addres	ss	
		Las \	/egas, NV 8	9169-6014	
			City/State an	d Zip code	
		mana	gedreports@	Dincorp.com	
		E-mail address:	(to be used fo	r future annual report no	tification)
For fi	arther information	concerning this ma	atter, please ca	dl:	
tncia Re	yes on behalf of In	Corp Services, Inc.	800 at (246-26	77
	Name of Perso		Area Code	Daytime Telepho	ne Number
	Registration Se Division of Co The Centre of	rporations Tallahassee pe Street, Suite 810		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
Please		the following amo ble to: FLORIDA DE \$78.75 Filing Certificate o	PARTMENT g Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 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.

(If name unavails	able in Florida, enter alternate c	ornorate name ad	opted for the purpose of transactin	g business in Florida)	
	Dolowara		26-3711280		
(State or countr	y under the law of which it is in		(FEI number, if ap	plicable)	
	11/12/2008				
(Date	of incorporation)		(Date of duration, if other t	than perpetual)	
		Upon Fili	ng		
	(Date first transa (SEE SECTIONS 607	cted business in F .1501 & 607.1502	lorida, if prior to registration) 2, F.S., to detennine penalty liabili	ity)	
	12122 Nicollet Avenue, Burnsville, MN 55337				
· · · · · ·	-	(Principal office	street address)		
	420 Park Place Bl	vd., Suite 100), Clearwater, FL 33759		
		(Content maning	address, if different)		
Name and stree	et address of Florida registere InCorp Services, Inc.	ed agent: (P.O.		2022 JU 5.76 74.11	151
	et address of Florida registere InCorp Services, Inc. 17888 67th Court Nor	ed agent: (P.O.)	Box <u>NOT</u> acceptable)	2022 JUL - I	1 E 7
Name:	et address of Florida registere InCorp Services, Inc.	ed agent: (P.O.)		2022 JUL - I PH	1 E S

^{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.

A. DIRECTORS			H22000225403 3
□Chairman	Name: Brian Collins	Chairman	Name: Russ Brown
□ Vice Chairman	Address:	□Vice Chairman	Address:
■ Director	420 Park Place Blvd., Ste 100	Director	420 Park Place Blvd., Ste 100
□President	Clearwater, FL 33759	₽ President	Clearwater, FL 33759
□Vice President		□Vice President	
Secretary	Treasurer	□ Secretary	□Treasurer
■Other CFO	Other	■Other <u>CEO</u>	□ Other
	Name: Barbara Gibbes Address:		Name:
Director	London, England EC1M 6AX UK	□Director _	
□President	- Solidon, Grigoria	□President	
□Vice President		□Vice President	
☐ Secretary	☐Treasurer	☐ Secretary	☐ Treasurer
□Other	Other	Other	Other
Chairman	Name:	Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□irector	
□President		☐ President	
□Vice President		□ Vice President	
Secretary	Treasurer	Secretary	☐ Treasurer
□Other	Other	□Other	Other
2 . 42 . 2 4 1	Use an attachment to report more than six (6). The attachment to the attachment to the attachment of t	ent of State Appual E	ed for reporting purposes only. Non-indexed Report form.
12.	Signature of Director	as Offices	
The officer or dire	ector signing this document (and who is listed in numb- alse information submitted in a document to the Depar	er 11 above) affirms timent of State consti	that the facts stated berein are true and that he or tutes a third degree felony as provided for in
13.	Brian Collir (Typed or printed name and capacity of per-	s, Secretary	
	(Typed or printed name and capacity of per	son signing applicatio	on)

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

DELAWARE, DO HEREBY CERTIFY "RTD SEALS CORP." 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 THIRTIETH DAY OF JUNE, A.D. 2022.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RTD SEALS CORP."

WAS INCORPORATED ON THE TWELFTH DAY OF NOVEMBER, A.D. 2008.

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

Authentication: 203813058

Date: 06-30-22