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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	09/01/2022	
Name:	Marcel Ogbonna-Amu	<u></u>
Reference #	1773564	
		FINANCIAL CORPORATION
Article	es of Incorporation/Authorizatio	n to Transact Business
Amer	ndment	
☐ Chan	ge of Agent	ANY ISSUES, CALL MARCEL:
Reins	statement	(518) 213 - 0826
Conve	ersion	Thank you!
☐ Merge	er	
Disso	lution/Withdrawal	
Fictition	ous Name	
Other	·	
Authorized A	Amount: 70.00	
Signature:	Marcel og bonner f	**/*

F: 800.944.6607

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.			l Corporation			
		poration; must include "INCORI p," "Inc," "Co," or "Corp.")	PORATED," "C	OMPANY," "CORPORATION,"		
	(If name unavailab	le in Florida, enter alternate corp	orate name adop	ted for the purpose of transacting business in	Florida)	
2.		Arizona	3.	45-3275623		
	(State or country	under the law of which it is incom	porated)	(FEI number, if applicable)		
4.		09/12/2011		Perpetual (Date of duration, if other than perpetu		
	(Date o	f incorporation)		(Date of duration, if other than perpetu	al)	
6.		U	pon Qualifica	ation		
		(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)				
7. 3133 West Frye Road, Suite 101, Chandler, Arizona 85226						
			(Principal o	ffice address)	3	
8.	Name and street	(C	J	dress, if different) ox NOT acceptable)	2022 SEP - 1 AH 10: 24	
	Name:	COGENCY GLOB	AL INC.	-	H 10: 2	
O	ffice Address:	115 North Calhoun Str	eet, Suite 4	-	1 F	
		Tallahassee	•	Florida 32301		
		(City)		, Florida 32301 (Zip code)		
H de fu	esignated in this a arther agree to con aties, and I am fai	d as registered agent and to d pplication, I hereby accept to nply with the provisions of a	he appointmen Il statutes relai lligations of m	of process for the above stated corporati t as registered agent and agree to act in tive to the proper and complete perform y position as registered agent.	this capacity. 1	

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors: A. DIRECTORS Vice Chairman: Address: Director: Stephen Lippens 3133 West Frye Road, Suite 101, Chandler, Arizona 85226 Kristopher Martin Director: 3133 West Frye Road, Suite 101, Chandler, Arizona 85226 B. OFFICERS Kristopher Martin 3133 West Frye Road, Suite 101, Chandler, Arizona 85226 Vice President: Address: Treasurer: _____ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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

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 felony as provided for in s.817.155, F.S.

13. Stephen Lippens - CEO

COVER LETTER

то:	Registration Sec Division of Cor					
SUBJ	SUBJECT: Capital Direct Financial Corporation					
		Name of	corporation - mus	t include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existence		Good Standing"	and check are subn	t Business in Florida," nitted to register the	
Please	return all corresp	ondence concerning	this matter to the	following:		
		S	Stephen Lipper	าร		
	.		Name of Person	1		
		Capital Dir	ect Financial C	Corporation		
			Firm/Company			
		3133 We	st Frye Road,	Suite 101		
			Address			
		Char	ndler, Arizona 8	35226		
		(City/State and Zip	code		
_			andcompliance			
	<u>-</u>	E-mail address: (to be used for fut	ure annual report no	otification)	
For fu	orther information	concerning this mat	ter, please call:			
	Max Lev	vis at	(828)	333-51	72	
	Name of Perso		Area Code	Daytime Teleph	one Number	
Enclo	Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	nt:	MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations	
	0.00 Filing Fce	© \$78.75 Filing I Certificate of	Fee & Д \$78.	.75 Filing Fee & lified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy	







Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

CAPITAL DIRECT FINANCIAL CORPORATION

ACC file number: 17071397

was incorporated under the laws of the State of Arizona on 09/12/2011;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. I have hereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 09/01/2022



Matthew Neubert, Executive Director



