# F22000005893

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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2022 SEP 12 PH 12: 43

SEP 20 2022 M. SOLOMON

### **COVER LETTER**

TO: Registration Section			
Division of Corporations			
SUBJECT: GSSYSTEMS. 1	$\gamma c$ .		
SUBJECT: GSSystems 1  Name of corporation - mus	t include suffix	-	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Autho "Certificate of Existence," or "Certificate of Good Standing" above referenced foreign corporation to transact business in F	and check are submitted to register the		
Please return all correspondence concerning this matter to the	following:		
Carina Cutter	-		
Name of Person	•	_	
	·	2022	
	74 / 22 / 24 / 25 / 24 / 25 / 24 / 25 / 25	SEP	
Firm/Company			
ZOSS. Audubor Address	Ave Ad	$\sim$	
Address		ان بار	
-	700 251	1:21	
Tampa FZ City/State and Zip	33605)	<u>-</u>	
A((oun+ing@9 E-mail address: (to be used for futu	reenscreens. tv	_	
E-mail address: (to be used for futi	ire annual report notification)		
For further information concerning this matter, please call:			
,			
Carina Cutter at (813)  Name of Person Area Code	762 7244		
Name of Person Area Code	Dautima Talanhana Number		
Name of Felson Area Code	Daytine refeptione Number		
STREET/COURIED ADDRESS.	MAIL ING ADDDDGG		
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations	Division of Corporations		
The Centre of Tallahassee	P.O. Box 6327		
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	Tallahassee, FL 32314		
Enclosed is a check for the following amount:			
Please make check payable to: FLORIDA DEPARTMENT OF ST	TATE		
_¥	75 Filing Fee & S87.50 Filing Fee,		
_	ified Copy Certificate of Status	<b>&amp;</b>	

#### 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	Systems, Inc.					
(Enter name of	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp,")				-	
	Green	er Scre	ens, In	c.		
	Mary Cook	er Scre	SARUTATION	Hes		
(If name unavai	ilable in Florida, enter alternate corporate na	me adopted for the	purpose of transa	acting busine	ss in Florida	1)
2 O	elaware try under the law of which it is incorporated;	3.	70-1260	555S		
(State or coun	try under the law of which it is incorporated	)	(FEI number,	if applicable)	•	<del>_</del>
49	18/2017 te of incorporation)	5.				
(Dat	e of incorporation)	(Date	of duration, if of	her than perp	octual)	
6	6/1/2					
<del></del>	(Date first transacted busines	ss in Florida, if pric				
_	(SEE SECTIONS 607.1501 & 60			-		
7. <u>8</u> 6	02 E. Whiting Str (Principal	ret I	ampa	FL	336 <i>02</i>	<u>~</u>
	(Principal	office street addres	ss)			
<u> </u>				_		_
	(Current ma	ailing address, if dif	Terent)			202
					# 2	2022 SEP 12
8. Name and stre	eet address of Florida registered agent: (	P.O. Box NOT a	cceptable)		## \$}}	<u>.</u>
Name:	Carina Cutte 208 S Audus	· <u> </u>				
Office Address:	208 S Audu	om Ave	-		Twelver of sty	PH 12: 43
	Tampa (City)	, Florida	33609		13.25 17.25	ည်
	(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.

(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: Shawn Cutter	□ Chairman	Name:	<del>-</del>		
□Vice Chairman	Address: 208 S. Audubon Ak	□Vice Chairman	Address:			
□Director	Tampa Fr 33609	Director				
□President		□ President				
□Vice President		□Vice President				
□ Secretary	☐ Treasurer	□Secretary		□Treasurer		
□Other	Other	Other		□Other		
□Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
Director		□Director				
President		□President				
□Vice President		□Vice President		2072		
☐ Secretary	Treasurer	□ Secretary		Treasurer S		
□Other	Other	Other		□Other (2) N		
□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	MARIE	<u> </u>	man			
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 felony as provided for in s.817.155, F.S.						
13		er				
(Typed or printed name and capacity of person signing application)						

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "GSSYSTEMS, 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 THIRTEENTH DAY OF JUNE, A.D. 2022.

6551533 8300 SR# 20222686034

You may verify this certificate online at corp delaware gov/authver shtml.

Julitary W. Bullecci, Secretary of blate

Authentication: 203664718

Date: 06-13-22