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AIR UP INC.

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COVER LETTER

	stration Section sion of Corporations		1			
	air un ina					
SUBJECT:		of corporation	- must inc	lude suffix		
Dear Sir or M	ladam:					
"Certificate of	"Application by Foreign (of Existence," or "Certifica" need foreign corporation to	te of Good Stand	ding" and	check are sub		,,
Please return	all correspondence concer	ning this matter	to the foll	owing:		
			1			
		Name of I	Person			
First Corporat	te Solutions					
		Firm/Com	pany			
914 S Street						
		Addre	:\$S			
Sacramento C	A 95811					
		City/State at	id Zip coc	le	· · · · · · · · · · · · · · · · · · ·	
raservices@fi	coso.com		į			
	E-mail addre	ss: (to be used f	or future a	innual report i	notification)	
For further in	nformation concerning this	matter, please c	all:			
		at ()			
Naп	ne of Person	Area Code	Ε΄ Ε	Daytime Telep	hone Number	
Regi Divis The (2415	EET/COURIER ADDRE stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 8 shassee, FL 32303	,		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	
	check for the following ar heck payable to: FLORIDA ling Fee	DEPARTMENT ing Fee &		iling Fee &	\$87.50 Filing F Certificate of S Certified Copy	Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

air up inc.			
	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting business in Florida	<u>a)</u>
2. Delaware	3.	87-1902445	
	ry under the law of which it is incorporated)	(FEI number, if applicable)	
4. 07/13/2021	5.		
(Date	e of incorporation)	(Date of duration, if other than perpetual)	
6			
,	(Date first transacted business in (SEE SECTIONS 607-1501 & 607-150	Florida, if prior to registration) 02, F.S., to determine penalty liability)	~ 3
_ 3435 Ocean Park	Blvd., #107 PMB 485, Santa Monica, CA 9040		19022
7		c street address)	-5
		<u> </u>	دم
	(Current mailing	g address, if different)	- 2
		-	AM 10: 37
8. Name and stre	et address of Florida registered agent: (P.O	Box NOT acceptable)	<u>.</u>
Name:	First Corporate Solutions, Inc.	·	ω -1
Office Address:	155 Office Plaza Drive		
Office Address:	Tallahassee	22201	
		, Florida 32301 (Zip code)	
	(City)	(Zip code)	
Having been nan designated in this further agree to c	s application, I hereby accept the appointm	re of process for the above stated corporation at the ent as registered agent and agree to act in this callailve to the proper and complete performance of ition as registered agent.	pacity. I
-	Rigistered agent's sig	genture)	
the Department of		not more than 90 days prior to delivery of this appl ficial having custody of corporate records in the jun	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

Name:	Chairman	Name:					
Address:	□Vice Chairman	Address:					
3435 Ocean Park Blvd. #107 PMB 485	Director	3435 Ocean Park Blvd. #107 PMB 485					
Santa Monica, CA 90405	□President	Santa Monica, CA 90405					
	□Vice President						
□Treasurer	☐ Secretary	☐ Treasurer					
Other	Other	□Other					
Name:	□Chairman	Name:					
Address:	□Vice Chairman	Address:					
3435 Ocean Park Blvd. #107 PMB 485	□Director						
Santa Monica, CA 90405	□President						
	□Vice President						
□Treasurer	Secretary	☐'freasurer					
□Other	□Other	Other					
Name	□Chairman	Nume:					
Address:	LI Vice Chairman	Address:					
	Director						
	President						
	□Vice President						
☐ Treasurer	Secretary	□Treasurer					
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 of	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 5.817.155, F.S.							
	Christian Demers Address: 3435 Ocean Park Blvd. #107 PMB 485 Santa Monica, CA 90405 Treasurer Other Name: Address: 3435 Ocean Park Blvd. #107 PMB 485 Santa Monica, CA 90405 Treasurer Other Other Name: Address: Other Signature of Director on coror signing this document (and who is listed in number	Christian Demers Chairman					

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "AIR UP 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 TWENTIETH DAY OF SEPTEMBER, 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 "AIR UP INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF JULY, A.D. 2021.

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

Authentication: 204435353

Date: 09-20-22