## F22000006919

(Red	questor's Name)	
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(Cit	//State/Zip/Phone	<del>=====================================</del>
PICK-UP	<b>i</b> ₩AIT	MAIL.
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(Bu	niness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## COVER LETTER

	on Section of Corporations			
SHRIFCT: Rig	htible Technologies, Inc.			
SUBJECT:	Name	of corporation - r	nust include suffix	
Dear Sir or Madar	31:			
"Certificate of Exi	plication by Foreign C istence." or "Certificat foreign corporation to	e of Good Standir	ig" and check are subm	Business in Florida," nitted to register the
Please return all co	orrespondence concert	ring this matter to	the following:	
John Laster				<u></u>
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Per	rson	
Laster Law, PLLC				
		Firm/Compa	ny	
421 East Robinson	Street			
		Address		
Orlando, FL 32801				
		City/State and	Zip code	
John@johnlasterlav				
	E-mail addre	ss: (to be used for	future annual report no	otification)
For further inform	nation concerning this	matter, please call	:	
John Laster		407	443-3745  Daytime Telephone Number	
Name of	Person	Area Code	Daytime Teleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a cher Please make check \$\rightarrow\$ \$70.00 Filing	eck for the following an payable to: FLORIDA I Fee	DEPARTMENT Of $\log$ Fee & $\square$ S	OF STATE 878.75 Filing Fee & Certified 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.

	adopted for the purpose of transacting business in Florida;		
	88-4107385		
under the law of which it is incorporated)	(FEI number, if applicable)		
of incorporation)	(Date of duration, if other than perpetual)		
George Dr Orlando, Fl. 32828	ice street address)		
	ree street address)		
	ng address, if different)		
t address of Florida registered agent: (P.C. John Laster  421 East Robinson St.  Orlando	022 K		
(Chy)	(Zip code)		
ed as registered agent and to accept sery application. I hereby accept the appoint comply with the provisions of all statutes (	ice of process for the above stated corporation at the ment as registered agent and agree to act in this cap relative to the proper and complete performance of to osition as registered agent.		
	(Current mailing t address of Florida registered agent: (P.C. John Laster 421 East Robinson St. Orlando (City)		

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	•						
□Chairman	Sabbithry Persad Name:	□Chairman	Name:				
ZIV ice Chairman	Address:	□Vice Chairman	Address:				
<b>a</b> Director	Orlando, Florida 32828	□Director					
#President		□President					
□Vice President		□ Vice President					
■ Secretary	<b>■</b> T(easurer	□Secretary		☐Treasurer			
Other CEO	□Other	□Other	<del></del>	□Other			
⊟Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□ Vice President					
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer			
□Othet	□Other	Other	<del></del>	☐Other			
□Chairman	Nume:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□ Secretary	☐ Treasurer	□Secretary		□Treasurei			
□Other	□Other	□Other		□Other			
individuals may b	Use an attachment to report more than six (6). The attachment to department and the index when filing your Florida Department of the start of the st	ent of State Annual R	eport form.	irposes only, Non-indexed			
Signature of Errector 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 of the saware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.  Sabbithry Persad							

(Typed or printed name and capacity of person signing application)

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RIGHTIBLE TECHNOLOGIES, 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 SEVENTH DAY OF OCTOBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIGHTIBLE TECHNOLOGIES, INC." WAS INCORPORATED ON THE SEVENTH DAY OF SEPTEMBER, A.D. 2022.

Authentication: 204574809

Date: 10-07-22