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Special Instructions to Fi	ling Officer:		
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S. FRANKLIN DEC - 3 2022

COVER LETTER

TO: Registration Division of O			
SUBJECT: Tobia	Custom Installation, Inc.		
30b3Ec1	Name of corporati	on - must include suffix	
Dear Sir or Madam:			
"Certificate of Existe		or Authorization to Transact Business is anding" and check are submitted to regness in Florida.	
Please return all corr	espondence concerning this matt	er to the following:	
Philip G. Tobia			
	Name o	of Person	
Tobia Custom Installa	tion, Inc.		
	Firm/Co	ompany	-
3438 Cancun Ct.			1
	Ado	dress	-0
Cape Coral, FL 33909			
	City/State	and Zip code	PH 1:00
pstobia@att.net			**************************************
	E-mail address: (to be use	d for future annual report notification)	
For further informati	ion concerning this matter, please	e call:	
Philip G. Tobia	at (225-0868	
Name of Pe	rson Area Co	ode Daytime Telephone Numbe	r
Registration Division of The Centre (Corporations of Tallahassee nroe Street, Suite 810	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	for the following amount: vable to: FLORIDA DEPARTMES S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Certified Copy Certif) Filing Fee. icate of Status & ied Copy

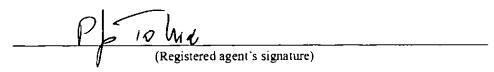
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

1.	Tobia Custom Installation, Inc.				
		orporation; must include "INCORPORATED." "orp." "Inc." "Co." or "Corp.")	COMPANY," "CORPORATION,"		
	TCI Home Audi	o			
	(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting b	usiness in Florida)	
7	Georgia (State or country under the law of which it is incorporated)		81-4721437		
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4.	01/01/2017	5.			
	(Date	of incorporation)	(Date of duration, if other than	perpetual)	
6.	n/a				
		(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502			
7.	3438 Cancun Ct;	Cape Coral, FL 33909			
		(Principal office	<u>street</u> address)	1111	
		(Current mailing a	ddress, if different)	•	
				1	
8.	Name and stree	et address of Florida registered agent: (P.O. F	Box NOT acceptable)	77	
	Name:	Philip G. Tobia		1: 06	
О	ffice Address:	3438 Cancun Ct		90	
		Cape Coral	. Florida 33909		
		(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.



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	Philip G. Tobia Name:	☐ Chairman	Name:		
□Vice Chairman	Address:	□Vice Chairman	Address:	. <u></u> -	
□Director	Cape Coral, FL 33909	□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		(.)	
Secretary	Treasurer	☐ Secretary		☐Treasurer:	
□Other	Other	☐Other		Other	
				70	
□Chairman	Name:	□Chairman	Name:	1: 00	
□Vice Chairman	Address:	□Vice Chairman	Address:	رح	
□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. Signature of Director or Officer					
The officer or dire she is aware that fa s.817.155, F.S. Philip G. To	ctor signing this document (and who is listed in numb alse information submitted in a document to the Depar	er 11 above) affirms ti	hat the facts state	ed herein are true and that he o	

Control Number: 16118241

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

TOBIA CUSTOM INSTALLATION, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 24030074 Date Inc/Auth/Filed: 01/01/2017 Jurisdiction : Georgia Print Date : 11/04/2022

Form Number : 211



Brad Rafforsperger

Brad Raffensperger Secretary of State