## Fa300000355

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

_	stration Section sion of Corporations						
	Punia Laba Ino						
SUBJECT:		e of corporation -	- must include	suffix			
Dear Sir or M	Aadam:						
"Certificate o	l "Application by Foreign C of Existence," or "Certifican need foreign corporation to	te of Good Stand	ling" and check				
Please return	all correspondence concer	ning this matter t	to the following	ឲ្ <u>ម</u> :			
Ron Bernstein	1						
		Name of P	Person				
Runic Labs. In	nc.						
·		Firm/Comp	oany				
6547 Midnigh	nt Pass Road #34				<i>e</i> •	2	
	· · · · · · · · · · · · · · · · · · ·	Addre	SS		email ( Try ) ( = True	122	
Siesta Key, F	L 34242					)EC	1
		City/State an	d Zip code	<del></del>	- <del>12  </del>	7	- Cutari
ronb@runic.ii	nc					PΚ	113
	E-mail addre	ss: (to be used fo	or future annua	l report not	lification)	ယှ	
For further in	nformation concerning this	matter, please ca	all:		(*** 2°) (**)	Ť.	
Richard Gora		_ at (	_) 424-8021 				_
Nan	ne of Person	Area Code	Daytin	ne Telepho	ne Numbe	:r	
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				
	-	DEPARTMENT	<b>OF STATE</b> \$78.75 Filing Certified Cop				of Status &

## 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.

(If name unavail	able in Florida, enter alternate corporate name ado	pted for the purpose of trans	sacting business in Florida)
Delaware			
(State or countr	y under the law of which it is incorporated)	(FEI number,	if applicable)
November 2, 20	22		
(Date	of incorporation) 5	(Date of duration, if o	ther than perpetual)
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,	orida, if prior to registration F.S., to determine penalty I	) iability)
6547 Midnight P	ass Road #34. Siesta Key, FL 34242		· .
	(Principal office s	street address)	7822 DE
	(Current mailing ac	ddress, if different)	N
			2 -11
Name and street	<u>et address</u> of Florida registered agent: (P.O. B	fox NOT acceptable)	70 4
Name:	Ron Bernstein		FH 3: 14
fice Address:	7500 Midnight Pass Road	_	•
	Sarasota	Florida	
	(City)	(Zip code)	-

under the law of which it is incorporated.

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

As DIRECTORS	• •		· •
· 🗆 Chairman	Name: Ron Bernstein	□Chairman	Name:
□Vice Chairman	Address: PO Box 35234	□ Vice Chairman	Address: 9628 Congdon Blvd
Director	Sarasota, FL 34242	■Director	Duluth MN 55804
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
■Other CEO	Other	Other COO	Other
□Chairman	Name:	□Chairman	Name:
□ Vice Chairman	Address:	□Vice Chairman	Address:
Director	Fishers, IN 46037	□Director	·····
■President		□President	2022
□Vice President		□Vice President	是 7
□Secretary	□Treasurer	☐ Secretary	Treasurer
□Other	□ Other	□Other	in . ⊒i
☐ Chairman	Name: Rob Green	□Chairman	Name:
□Vice Chairman	Address: 4235 SE Concord Rd	□Vice Chairman	Address:
Director	Milwaukie OR 97267	□Director	
□President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	Other	Other
Important Notice: Usindividuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Depar Royald Box	tment of State Annual Re	d for reporting purposes only. Non-indexed eport form.

Signature of Director or Officer

ficer or director signing this document (and who is listed in number 11 above) affirms

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.

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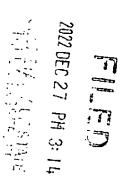
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RUNIC LABS, 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 FIRST DAY OF DECEMBER, A.D. 2022.





Authentication: 204979590

Date: 12-01-22