F2300000545

| | (Requestors Name) | |
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| | (Address) | |
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| | (Address) | |
| | (City/State/Zip/Phone #) | |
| PICK-UF | WAIT | MAIL |
| | (Business Entity Name) | |
| | (Document Number) | |
| ed Copies | Certificates of S | Status |
| 5 ecial Instructions to | Filing Officer: | |
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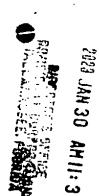
Office Use Only



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JAN 3 0 2023 K. Brumbies CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 416833 8394097

AUTHORIZATION : Spulleran

COST LIMIT : \$ 600.00

ORDER DATE: January 27, 2023

ORDER TIME : 8:58 AM

ORDER NO. : 416833-005

CUSTOMER NO: 8394097

FOREIGN FILINGS

NAME: LEISTRITZ ADVANCED

TECHNOLOGIES CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ___ CERTIFIED COPY

PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|---|----------------|--|
| SUBJECT: Leistritz Advanced Technologies | Согр. | |
| | orporation - | must include suffix |
| Dear Sir or Madam: | | |
| The enclosed "Application by Foreign Corpo "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans | Good Standi | uthorization to Transact Business in Florida," ng" and check are submitted to register the in Florida. |
| Please return all correspondence concerning | this matter to | the following: |
| Allen J. Underwood II, Esq. | | |
| | Name of Po | rson |
| Lite DePalma Greenberg & Afanador, LLC | | |
| | Firm/Comp | any |
| 570 Broad Street, Suite 1201 | | |
| | Addres | 3 |
| | | |
| C | ity/State and | Zip code |
| Newark, New Jersey 07102 | | |
| E-mail address: (t | o be used fo | future annual report notification) |
| For further information concerning this matt | er, please ca | t: |
| Allen J. Underwood II, Esq. | 973 | 623-3000 |
| Name of Person | Area Code | Daytime Telephone 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 check for the following amount Please make check payable to: FLORIDA DEPA \$70.00 Filing Fee \$78.75 Filing For Certificate of S | ce & | DF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy 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.

| | orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.") | , com ma, cold did non, | |
|-----------------------------------|---|--|--|
| (If name unavaila | able in Florida, enter alternate corporate name | adopted for the purpose of transacting | business in Florida) |
| Delaware | | 593666147 | |
| (State or countr | y under the law of which it is incorporated) | (FEI number, if appl | licable) |
| August 18, 2000 | | Perpetual | |
| (Date of incorporation) | | (Date of duration, if other than perpetual) | |
| July 1, 2019 | | _ | |
| Leistritz Advance | , | in Florida, if prior to registration) 502, F.S., to determine penalty liability llendale, New Jersey 07401 | 0 |
| (Principal office street address) | | 2023 JAN 3 U | |
| | (Current maili | ing address, if different) | |
| Name and street | et address of Florida registered agent: (P. | O. Box NOT acceptable) | · ———————————————————————————————————— |
| Name: | Russell R. Frazier, Jr. | | · · · · · · |
| ffice Address: | 919 Neptune Cirlc | | |
| | Neptune Beach | 32266 | |
| | | , Florida | |

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 Name: Michael Evens Anton Feurst **ii** Chairman □Chairman Attn. Michael Everts Attn. Anton Feurst Vice Chairman Address □Vice Chairman Leistritz Atkiengesellehaft Leistritz Atkiengesellchaft Director **■**Director Markgrafenstr, 36-39 Markgrafenstr, 36-39 □President President 90459 Nuremberg 90459 Nuremberg □Vice President □Vice President □ Secretary □ Freasurer □ Freasurer Secretary □Other ___ □Other __ □Other ______ □Other _____ Name. ___ Sven Olson **⊒**Chaoman □Chairman Name: Attn. Sven Olson Attn. Guido Wey □ Vice Chairman Address: Address: □Vice Chairman Leistritz Atkiengesellchaft Leistritz Advanced Technologies Corp. Director Director Markgrafenstr. 36-39 165 Chesmut Street EPresident □President 90459 Nuremberg Allendale, NJ 07401 □ Vice President □ Vice President □Treasurer □ Secretary ☐ Treasurer □ Secretary. □Other _____ □Other _____ □Other ______ □Other _______ Name: ____ Darren Mowry Name: □ Chairman □ Chairman Attn. Darren Mowry Attn. Klaus Theusner □ Vice Chairman □Vice Chairman Leistritz Atkiengesellchaft Leistritz Advanced Technologies Corp. □Director Director 165 Chestnut Street Markgrafenstr. 36-39 President □President Allendale, NJ 07401 90459 Nuremberg □Vice President □ Vice President □ Freasurer □Secretary □Treasurer □ Secretary □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,

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 817,155, E.S.

13. Darren Mowry, President, Leistrtiz Advanced Technologies Corp.



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

DELAWARE, DO HEREBY CERTIFY "LEISTRITZ ADVANCED TECHNOLOGIES CORP."

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 TWENTY-SEVENTH DAY OF

JANUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEISTRITZ

ADVANCED TECHNOLOGIES CORP." WAS INCORPORATED ON THE EIGHTEENTH DAY

OF AUGUST, A.D. 2000.

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



Authentication: 202590133

Date: 01-27-23

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SR# 20230281101