# < 35,0000001691

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Copies Certificates of Status
Instructions to Filing Officer:

Office Use Only



400405048764

S. FRANKLIN MAR 2 3 2023



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 120000000195

REFERENCE : 340425 7528590

AUTHORIZATION :

COST LIMIT : \$70.00

ORDER DATE: January 10, 2023

ORDER TIME : 1:52 PM

ORDER NO. : 340425-025

CUSTOMER NO: 7528590

#### FOREIGN FILINGS

NAME: 11:11 SYSTEMS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

#### **COVER LETTER**

	stration Section	ions			
SHR IFCT.	11:11 Systems	Inc.			
SUBJECT		Name of corpora	ition - must	include suffix	
Dear Sir or M	1adam:				
"Certificate o	of Existence," o	y Foreign Corporation r "Certificate of Good poration to transact bu	Standing" a	ind check are subr	t Business in Florida," nitted to register the
Please return	all corresponde	nce concerning this m	atter to the	following:	
	<u></u>	Name	e of Person		
		Firm/	Company		
			.ddress		
		A	adress		 :
		City/Sta	ate and Zip	code	
	<u>E</u>	-mail address: (to be us	sed for futu	re annual report n	otification)
For further in	iformation conc	erning this matter, plea	ase call:		
			)		
Nam	ne of Person	at ( Area	Code	Daytime Teleph	none 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 Please make cl □ \$70.00 Fil	heck payable to:	ollowing amount: FLORIDA DEPARTM \$78.75 Filing Fee & Certificate of Status	□ \$78.7	ATE 15 Filing Fee & fied 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.

		dopted for the purpose of transacting bu	isiness in Florida)	
(State or country under the law of which it is incorporated 04/16/2020		3. 85-0775797		
04/10/2020	ry under the law of which it is incorporated)  5.	(FEI number, if applica		
(Date of incorporation)		(Date of duration, if other than perpetual)		
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 2, F.S., to determine penalty liability)	·	
695 RT. 46, Suite	301 Fairfield NJ 07004		r-, )	
		street address)	7.	
	(Current mailing	address, if different)	22	
Name and stree	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	 	
Name:	Corporation Service Company			
fice Address:	1201 Hays Street		γ'n	
	Tallahassee	, Florida 32301		
	(City)	(Zip code)		

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.

(Registered agent's signature)

a. DIRECTORS				
OChairman	Name: Brett Diamond	□Chairman	Name:	
□Vice Chairman	Address: 695 RT. 46, Suite 301	□ Vice Chairman		
aDirector	Fairfield NJ 07004	_		
⊕President	<del></del>	President		
□Vice President		CJVice President		
C Secretary	☐Treasurer	□ Secretary	☐ Treasurer	
■Other <u>CEO</u>	Other		<del>-</del>	
□Chairman	Mark Shalhoub	DCI :		
□Vice Chairman	Address: 695 RT. 46, Suite 301		Name:	
□ Director	airfield NJ 07004	,	Address:	
□President				
_			75.5	
		_ □ Vice President		
□Secretary CFO	☐ Treasurer	Secretary	□Treasure <del>.</del>	
■Other	□Other	Other		
□Chairman N	Jonathan Coker	. □Chairman N	ame:	
	ddress:		ame:	
	airfield NJ 07004	Director	ddress:	
□President		□President		
□Vice President		□ Vice President		
□ Secretary	☐ Treasurer	□ Secretary	⊖Treasurer	
COO ☐Other	COmer	.⊐Other		
12. The officer or director's	an attachment to report more than six (6). The dot to the index when filing your Fibrida begoes to the index when filing your Fibrida begoes to be signature of Directions of Directions submitted in a document to the E	ector or Officer	reporting purposes only. Non-indexed form.	
13. Mark Shalhoub,	CFO			

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

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "11:11 SYSTEMS, 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 SEVENTEENTH DAY OF MARCH, 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 "11:11 SYSTEMS, INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF APRIL, A.D. 2020.

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

ANYS OF THE PARTY OF THE PARTY

Authentication: 202947544

Date: 03-17-23