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S. ROBERTS

APR - 5 2023

## COVER LETTER

{}	Division of Corporations						
erra Irz	T: National Electronic Attachme	nt, Inc.					
SUBJEC	Name (	of corporation - m	ust include suffix				
	or Madam:						
and well time	osed "Application by Foreign Co ate of Existence," or "Certificate Greneed foreign corporation to the	ot Good Standing	2 and check are summer	isiness in Florida." ed to register the			
Please re	turn all correspondence concern	ing this matter to	he following:				
Shannon	Weinberg						
		Name of Per	son				
National	Flectronic Attachment, Inc.						
		Firm/Compar	i,v				
100 Ashi	ord Center North, Suite 300						
		Address	<del></del>				
Dunwoo	dy, Georgia 30338						
		City/State and	Zip code				
shannon	weinberg@yynecorp.com						
	E-mail addres	ss: (to be used for	future annual report noti	fication)			
For furt	ner information concerning this	matter, please call	;				
Shaano	Shannon Weinberg at ( ) 273-7154  Name of Person Area Code Daytime Telephone Number						
	Name of Person	Area Code	Daytime Telephor	ne Number			
	STREET/COURIER ADDRE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		MAILING ADI Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion corations			
Please (	ed is a check for the following a make check payable to, FLORIDA .00 Filing Fee \$78.75 Fi Certificat	DENTRUGGGGG	OF STATE \$78.75 Filing Fee & Certified Copy	12 \$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.

f nama unavai	Johla in Florida, enter alternata comorat	• name adopted for the numose of transacting busine	ss in Florida)		
	lable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)				
Delaware	ry under the law of which it is incorpora	3. 59-3399754 (FEI number, if applicable)	\		
2/23/1999		5. (Date of duration, if other than perp	natual)		
	e of incorporation)	(Date of duration, it other than perp	petuary		
10/25/2021					
		siness in Florida, if prior to registration) & 607.1502, F.S., to determine penalty liability)			
00 Ashford Cer	nter North, Suite 300, Dunwoody, GA 3	0338			
		ipal office street address)	<del></del>		
	•		~		
	(Curren	nt mailing address, if different)	- 75,		
			`		
Name and stre	et address of Florida registered ager	nt: (P.O. Box <u>NOT</u> acceptable)	!		
	Corporation Service Company				
Name:			:		
fice Address:	1201 Hays Street				
	Tallahassee	, Florida 32301	-با ن		
	(Ch.)				
	(City)	(Zip code)			

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.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to

A. DIRECTORS			
□Chairman	Stephen Roberts Name:	□Chairman	Name: Claudia Stein-Martin
☐ Vice Chairman	Address:	□Vice Chairman	Address: 100 Ashford Center North
Director	Suite 300, Dunwoody, GA 30338	Director	Suite 300, Dunwoody, GA 30338
□President		□President	
□Vice President		₩Vice President	
□Secretary	□Treasurer	□ Secretary	<b>□</b> Treasurer
Other CEO	□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
□ 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
individuals may be	Use an attachment to report more than six (6). The audie added to the index when filing your Florida Department of Director	nent of State Annual R	ed for reporting purposes only. Non-indexed eport form.
The officer or dire she is aware that f s.817.155, F.S.	ector signing this document (and who is listed in numb alse information submitted in a document to the Depa	ber 11 above) affirms t artment of State constit	hat the facts stated herein are true and that he or utes a third degree felony as provided for in
Claudia Ste	ein-Martin, Vice President & Treasurer		

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "NATIONAL ELECTRONIC ATTACHMENT, 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 "NATIONAL ELECTRONIC ATTACHMENT, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 1999.

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

THE STATE OF THE S

Authentication: 202945848

Date: 03-17-23