

F23000002806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

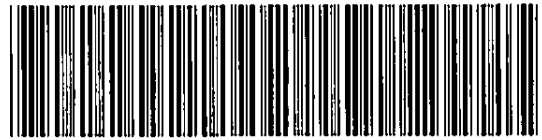
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 MAR 24 PM 4: 08

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AND  
FILED

MAY 11 2023  
K. Brumby

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **Zoneomics Incorporated**

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

**Aleza Cory**

Name of Person

**Zoneomics Incorporated**

Firm/Company

**21 Torwood Court**

Address

**Huntington Station, NY 11746**

City/State and Zip code

**aleza@zoneomics.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Aleza Cory**

at ( **631** ) **300-7991**

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 DEPARTMENT OF STATE**

\$70.00 Filing Fee

\$78.75 Filing Fee &  
Certificate of Status

\$78.75 Filing Fee &  
Certified 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.

1. Zoneomics Incorporated
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "In.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware (State or country under the law of which it is incorporated)
3. (FEI number, if applicable)

4. 1/11/2018 (Date of incorporation)
5. (Date of duration, if other than perpetual)

6. 7/1/2022 (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6919 SW 18th St Ste201 Boca Raton, FL 33433
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agents Inc

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702
(City) (Zip code)

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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.

David Roberts

(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]:

DIRECTORS

Chairman Name: MATTHEW PLAYER

Vice Chairman Address: 7163 VIA PALOMAR

Director BOCA RATON, FL 33433

President

Vice President

Secretary  Treasurer

Other CEO  Other

Chairman Name:

Vice Chairman Address:

Director

President

Vice President

Secretary  Treasurer

Other  Other

Chairman Name:

Vice Chairman Address:

Director

President

Vice President

Secretary  Treasurer

Other  Other

Chairman Name:

Vice Chairman Address:

Director

President

Vice President

Secretary  Treasurer

Other  Other

Chairman Name:

Vice Chairman Address:

Director

President

Vice President

Secretary  Treasurer

Other  Other

Chairman Name:

Vice Chairman Address:

Director

President

Vice President

Secretary  Treasurer

Other  Other

Chairman Name:

Vice Chairman Address:

Director

President

Vice President

Secretary  Treasurer

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. Matthew Player  
Signature of Director or Officer

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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.

13. Matthew Player CEO

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

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ZONEOMICS INCORPORATED" 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 SIXTH DAY OF MARCH, A.D. 2023.



  
Jeffrey W. Bullock, Secretary of State

6705714 8300

SR# 20230642611

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 202847685

Date: 03-06-23