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(Requestor's Name)			
(Address)	<u> </u>		
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAI	<u>_</u>		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: SecturaSOFT, Inc.			
	on - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation f "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact business."	tanding" and check are submitted to register the		
Please return all correspondence concerning this mat	ter to the following:		
Carolyn Thompson, Paralegal			
Name	of Person		
O'Neal Industries, Inc.			
Firm/C	ompany		
2311 Highland Avenue South, Suite 200			
Ad	dress		
Birmingham, AL 35205			
City/State	e and Zip code		
legal@onealind.com			
E-mail address: (to be use	d for future annual report notification)		
For further information concerning this matter, pleas	e call:		
Carolyn Thompson at (205) 261-8210			
Name of Person Area C	ode 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 DEPARTME. ✓ \$70.00 Filing Fee ✓ Certificate of Status	NT OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee. Certified Copy Certificate of Status & Gertified Copy		

RECEIVED

APR 2 8 Lul3

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 unava	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting by	usiness in F	lorida)	
2. DE		88-2751269		1011011)	
(State or coun	3. (ary under the law of which it is incorporated)	(FEI number, if applic	able)		
4. 06/10/2022	5	• • • • • • • • • • • • • • • • • • • •	,		
(Dat	e of incorporation)	(Date of duration, if other than	perpetual)		
6					
2244 11: 4.1	(SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	S	2023	
7. 2311 Highla	nd Avenue South, Suite 200 Birming	gham, AL 35205	F-7:	AP T	77
·	(Principal otti	ice <u>street</u> address)		R 28	
	(Current mailir	ng address, if different)	- 160	<u> </u>	7
8. Name and stre	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	7.25	t: 0	_
Name:	CSC		ı		
Office Address:	1201 Hays Street				
	Tallahassee	, Florida 32301			
	(City)	(Zip code)			
further agree to c	ent's acceptance: sed as registered agent and to accept servic application, I hereby accept the appointn omply with the provisions of all statutes re with and accept the obligations of my pos	tent as registered agent and agree to	and the all to		
	Steph Albe	rrtini			

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS			
□Chairman	Name: Troy A. Lugo	□Chairman	Name:Sean Hughes
□Vice Chairman	2311 Highland Avenue South, Suite	200	2311 Highland Avenue South, Suite 200 Address:
□Director	Birmingham, AL 35205	□Director	Birmingham, AL 35205
□President		□President	
□Vice President		□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
⊘Other CFO, A	Asst Secretary _{□Other}	☑Other COO	□Other
□ Chairman	Name: Scott Winrow 2311 Highland Avenue South, Suite 2	□Chairman	Name: Brad Stropes
□ Vice Chairman	Address:	□ Vice Chairman	2311 Highland Avenue South, Suite 200
□Director	Birmingham, AL 35205	Director	Birmingham, AL 35205
□President		□President	
		☑Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
□()ther		□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
marriadas may re	Ise an attachment to report more than six (6). The atta added to the index when filing your Florida Departm	ent of State Annual Re	d for reporting purposes only. Non-indexed sport form.
	Menajure of Director	or Officer	
s.817.155, F.S.	for signing this document (and who is listed in numbers information submitted in a document to the Departure of the Departure	er 11 above) affirms th timent of State constitu	at the facts stated herein are true and that he or tes a third degree felony as provided for in
	J. J Hour. Octorcially		





Page 1

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

DELAWARE, DO HEREBY CERTIFY "SECTURASOFT, 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 THIRD DAY OF APRIL, 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 "SECTURASOFT, INC." WAS INCORPORATED ON THE TENTH DAY OF JUNE, A.D. 2022.

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

Authentication: 203060947

Date: 04-03-23