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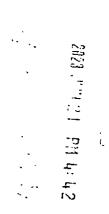
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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T. LEMIEUX

JUN 2 8 2023

## COVER LETTER

	n of Corporations				
SUBJECT: F	LEXCHARGE INC.				
<del>-</del>	Name o	f corporat	ion - mus	include suffix	
Dear Sir or Mad	lam:				
"Certificate of E	Application by Foreign Co. Existence," or "Certificate d foreign corporation to tre	of Good S	tanding" :	and check are subn	
Please return all	correspondence concernis	g this ma	tter to the	following:	
ANGELINE TAN	J				
<u> </u>		Name	of Person		
SAGENT MANA	GEMENT				
		Firm/C	ompany		,
691 S. MILPITA	S BLVD, STE 212				
<u></u>		A	ldress		
MILPITAS, CA	95035				
		City/Star	e and Zip	code	
SAGENTOPERA	ATIONS@SAGENTMANA				
	E-mail address	(to be us	ed for full	ire annual report n	otification)
For further info	rmation concerning this m	atter, plea	se call:		
ANGELINE TAN at (408 ) 263-1040		3-1040			
Name o	of Person	Area (	Code	Daytime Teleph	ione Number
Registri Divisio The Cel 2415 N	ET/COURIER ADDRESS ation Section in of Corporations intre of Tallahassee . Monroe Street, Suite 810 ssee. FL 32303	6:		LING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	rporations
	neck for the following amount for the followin	PARTME 5 Fee &	<b>₽</b> \$78.	FATE 75 Filing Fee & ified 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.

EINC.				
corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"			
lable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Flor	ida)		
3	87-3619473			
ry under the law of which it is incorporated)	(FEI number, if applicable)			
5	PERPETUAL			
e of incorporation)	(Date of duration, if other than perpetual)			
S BLVD, STE 212, MILPTIAS, CA 95035				
(Current mail	ng address, if different)			
ret address of Florida registered agent: (P. INCORPORATING SERVICES, LTD.  1540 GLENWAY DR  TALLAHASSEE  (City)	O. Box NOT acceptable)  , Florida 32301 (Zip code)	· ·		
	corporation; must include "INCORPORATED Corp." "Inc." "Co," or "Corp.")  lable in Florida, enter alternate corporate name  3. ry under the law of which it is incorporated)  (Date first transacted business (SEE SECTIONS 607.1501 & 6	corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  corp." "Inc.," "Co.," or "Corp.")  lable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida, enter alternate corporated and purpose of transacting business in Florida, if prior to registration (FEI number, if applicable)  perpetual  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  S BLVD, STE 212, MILPTIAS, CA 95035  (Principal office street address)  (Current mailing address, if different)  incet address of Florida registered agent: (P.O. Box NOT acceptable)  INCORPORATING SERVICES, LTD.  TALLAHASSEE  , Florida  (City)  (City)  (City)  (City)  (City)  (City)  (City)  (City)  (City)  (Composition of the purpose of transacting business in Florida  (FEI number, if applicable)  (FI number, if applic		

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.

Anyn Taylor /s/ Assistant Secretary on behalf of Incorporating Services, Ltd.
(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.

<sup>11.</sup> 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:	Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director	691 S MILPITAS BLVD, STE 212	Director	691 S MILPITAS BLVD, STE 212
□President	MILPTIAS, CA 95035	President	MILPTIAS, CA 95035
□Vice President		□Vice President	
☐ Secretary	☐ Treasurer	□ Secretary	□Treasurer
CEO	Other	Other	□ Other
□Chairman	Name:	□ Chairman	Name: ADORAM GAASH
□ Vice Chairman	Address:	☐ Vice Chairman	Address:
Director	691 S MILPITAS BLVD, STE 212	<b>■</b> Director	691 S MILPITAS BLVD, STE 212
□President	MILPTIAS, CA 95035	□President	MILPTIAS, CA 95035
□Vice President		□Vice President	
□ Secretary	□Treasurer	Secretary	☐ Treasurer
□Other	Other	□Other	Other
□ Chairman	Name: LEO YEN	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director	691 S MILPITAS BLVD, STE 212	Director	
□President	MILPTIAS, CA 95035	□President	
□Vice President		□ Vice President	
□Secretary	□Treasurer	□ Secretary	□Treasurer
Other CFO	Other	□Other	Other
individuals may be	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department	schment will be image ent of State Annual R	ed for reporting purposes only. Non-indexed eport form.
12	Signature of Director of	or Officer	
The officer or dire she is aware that f s.817.155, F.S.	ector signing this document (and who is listed in numberalse information submitted in a document to the Depart	er 11 above) affirms t timent of State constit	hat the facts stated herein are true and that he or utes a third degree felony as provided for in

... LEO YEN, CFO

Page 1



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

DELAWARE, DO HEREBY CERTIFY "FLEXCHARGE 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 SIXTH DAY OF JUNE, A.D. 2023.

Authentication: 203498032

Date: 06-06-23