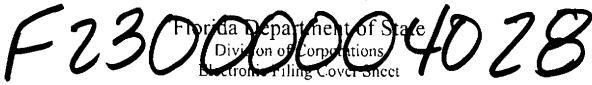
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Division of Corporations



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(((H23000237644 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC Account Number : 120070000159 Phone : (239)777-1028 Fax Number : (877)275-3593

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: <u>SUPPORT@LICENSESETC.COM</u>

FOREIGN PROFIT/NONPROFIT CORPORATION Modern Electric, INC.

Certificate of Status	1
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COVER LETTER

то:		tration Section on of Corporations			
SUBJE	ECT:	MODERN ELECTRIC, INC.			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Name of	corporation -	must include suffix	
Dear Si	r or Ma	adam:			
"Certifi	cate of	"Application by Foreign Corp Existence," or "Certificate of ted foreign corporation to train	f Good Stand	ing" and check are submit	usiness in Florida," ted to register the
Please r	return a	all correspondence concerning	g this matter t	o the following:	
TODD	BABBI	ТТ			
			Name of Po	erson	
LICENS	SES. ET	rc Inc.			
			Firm/Comp	any	
27911 C	CROWN	N LAKE BLVD, SUITE #211			
			Addres	3	
BONITA	a Spri	NGS, FL 34135			
			City/State and	Zip code	
SUPPO	RT@LI	ICENSESETC.COM			
		E-mail address:	(to be used for	future annual report notif	fication)
For furt	her inf	ormation concerning this mat	ter, please cal	l:	
TODD BABBITT		e Daytime Telephone Number			
	Name	e of Person	Area Code	Daytime Telephon	e Number
	Regist Division The Control	ET/COURIER ADDRESS: rration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL.	on orations
	iake che	check for the following amounted payable to: FLORIDA DEFing Fee	PARTMENT (Fee & □ :		S87.50 Filing Fee, Certificate of Status & Certified Copy

(((H23000237644 3)))

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.

MODERN EL	ECTRICAL, INC.		
(If name unavail	lable in Florida, enter alternate corporate name ac	lopted for the purpose of transacting	g business in Florida)
MASSACHUS	ETTS 3	16-1840877	
(State or count	ry under the law of which it is incorporated)	(FEI number, if app	plicable)
01/25/2013	5.		
(Date	5 e of incorporation)	(Date of duration, if other t	han perpetual)
	(Date first transacted business in 1 (SEE SECTIONS 607.1501 & 607.150		ıy)
190R MAIN ST.	SUITE #8, WILMINGTON, MA 01887		
	(Principal office	street address)	
190R MAIN ST	. SUITE #8, WILMINGTON, MA 01887		
	16:		
	(Current mailing	address, if different)	
None and stee	· · · · ·		20 5
Name and stre	et address of Florida registered agent: (P.O.		2023 J
Name and stree	· · · · ·		2023 JUL
Name:	et address of Florida registered agent: (P.O.		2023 JUL 11
Name:	et address of Florida registered agent: (P.O. LICENSES, ETC., INC. 27911 CROWN LAKE BLVD SUITE 211	Box NOT acceptable)	2023 JUL I I AM
Name:	et address of Florida registered agent: (P.O. LICENSES, ETC., INC. 27911 CROWN LAKE BLVD SUITE 211		2023 JUL 11 AM 12:
Name: Tice Address:	et address of Florida registered agent: (P.O. LICENSES, ETC., INC. 27911 CROWN LAKE BLVD SUITE 211 BONITA SPRINGS (City)	Box NOT acceptable) Florida 34135	2023 JUL 11 AM 12: 04
Name: lice Address: Registered ag	et address of Florida registered agent: (P.O. LICENSES, ETC., INC. 27911 CROWN LAKE BLVD SUITE 211 BONITA SPRINGS (City) ent's acceptance:	Box NOT acceptable) , Florida 34135(Zip code)	2023 JUL 11 AM 12: 04 corporation at the
Name: fice Address: Registered agwing been nansignated in this	et address of Florida registered agent: (P.O. LICENSES, ETC., INC. 27911 CROWN LAKE BLVD SUITE 211 BONITA SPRINGS (City) ent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointme	Box NOT acceptable) , Florida 34135 (Zip code) to of process for the above stated and agree	corporation at the period of the period of the control of the corporation at the corporation at the corporation at the period of the corporation at the corporation at the period of the period
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Name: Tice Address: Registered ag wing been nan signated in this other there agree to contact the street agree to contact.	et address of Florida registered agent: (P.O. LICENSES, ETC., INC. 27911 CROWN LAKE BLVD SUITE 211 BONITA SPRINGS (City) ent's acceptance: ned as registered agent and to accept services application, I hereby accept the appointme	Box NOT acceptable) Florida 34135 (Zip code) r of process for the above stated and as registered agent and agreative to the proper and complete	corporation at the period of the period of the control of the corporation at the corporation at the corporation at the period of the corporation at the corporation at the period of the period
Name: Tice Address: Registered ag aving been nan signated in this rther agree to c	et address of Florida registered agent: (P.O. LICENSES, ETC., INC. 27911 CROWN LAKE BLVD SUITE 211 BONITA SPRINGS (City) ent's acceptance: med as registered agent and to accept services application, I hereby accept the appointment comply with the provisions of all statutes rel	Box NOT acceptable) Florida 34135 (Zip code) r of process for the above stated and as registered agent and agreative to the proper and complete	corporation at the period of the period of the control of the corporation at the corporation at the corporation at the period of the corporation at the corporation at the period of the period

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]:

(((H23000237644 3)))

A. DIRECTORS			.,,
□ Chairmao	Name:DANNY RESENDES	□Chairman	Name:
□Vice Chairman	Address	□Vice Chairman	Address.
□Director	WILMINGTON, MA 01887	□Director	
President		□President	
□Vice President		□Vice President	
ElSecretary	[]Treasurer	Disecretary	TiTreastner
□Other	Other]Other	Other
∐Chairman	Name;	IlChairman	Name.
□Vice Chairman	Address:	Il Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
☐ Secretary	□ Treasmer	∃Secretary	□Treasurer
□Other	Other	□Othet	
∐Chairman	Name:	IIChairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		[]Director	
L]President			
□Vice President		DVice President	
☐ Secretary	□Treasurer	□Secretary	☐Treasurer
☐ Other	□Other	□Other	
	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Departments.	it of State Annual Re	port form,
12	Supplying of Director or		
	Signature of Director or	Officer	
slie is aware that fa s.817.155, F.S.	for signing this document (and who is listed in number lise information submitted in a document to the Department to the		
13. DANNY RES	SENDES, PRESIDENT (Typed or printed pame and canacity of person	a signing goaliesties	<u> </u>



The Commonwealth of Massachusetts Secretary of the Commonwealth State Rouse, Boston, Massachusetts 02183

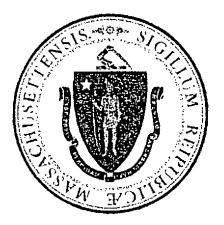
Date: July 04, 2023

To Whom It May Concern:

I hereby certify that according to the records of this office,

MODERN ELECTRIC INC

Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galicin

Certificate Number: 23060614950

Verify this Certificate at: http://corp.sec.state.ma/us/CorpWeb/Certificates/Verify.aspx

Processed by: ili