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(Re	equestor's Name)					
(A	ddress)					
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to Filing Officer:						
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M. SOLOMON JUL 2 6 2023

COVER LETTER

	Registration Section Division of Corporations					
SUBJE	Timothy E Anderson Incorporat	ed				
SODJE		corporation -	must include suffix			-
Dear Sir	r or Madam:					
"Certific	losed "Application by Foreign Corp cate of Existence," or "Certificate of eferenced foreign corporation to tran	'Good Stand	ing" and check are subn			
Please r	eturn all correspondence concerning	this matter t	o the following:			
Tim And	derson					
		Name of P	erson		:21,	202
Timothy	E Anderson Incorporated				~ (. 1 - 2	ال و
840 Apo	ollo St. Suite 100	Firm/Comp	sany		IASSE!	JL 28
El Segui	ndo. CA 90245	Addres	s		OF STAI	PK 12: !
	(City/State an	d Zip code		- ਜ਼ੁਜ਼	- 6
tanderso	n@marathonins.com	. 1 . 10				_
			r future annual report no	otification)		
For furt	her information concerning this mat	ter, please ca	11:			
Tim And	derson	(323	691-1045			
	Name of Person	Area Code	Daytime Teleph	one 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			
Please m	ed is a check for the following amountake check payable to: FLORIDA DEP 00 Filing Fee	ARTMENT (OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Fili Certificate Certified C	of Status	; &

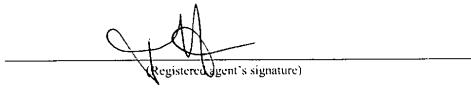
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. T	Fimothy E Anderson Incorporated				
	Enter name of corporation; must include "INCORPORATE Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")	žD,	" "COMPANY," "CORPORATION,"		
-	Timothy Edward Anderson Incorporated				
(If name unavailable in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Flo	rida)	
2.	California	3	95-4764355		
2. (State or country under the law of which it is incorporate)	(FEI number, if applicable)		
4.	09/02/1999	5.			
٠	(Date of incorporation)		(Date of duration, if other than perpetual)		
6.	6/09/2023				
-	(SEE SECTIONS 607.1501 & 60		n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7	40 Apollo St, Suite 100, El Segundo, CA 90245				
	(Principal	off	ice <u>street</u> address)	2 C	2023 JUL
	(Current ma	ailii	ng address, if different)	HASS	UL 28
8. 1	Name and street address of Florida registered agent: ((P.C	O. Box <u>NOT</u> acceptable)		
	Name: Tin Anderson			OF STATE	PH 12: 5
Off	ice Address: 22715 Island		Lakes U!	ZIT	6
	Estero (City)		Florida <u>33928</u> (Zip code)		

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.



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.

A. DIRECTORS Tim Anderson □Chairman □Chairman Name: Name: ______ 4242 Stansbury Ave, #202 □Vice Chairman Address: □Vice Chairman Address: Sherman Oaks, CA 91423 Director □ Director **■**President □President □ Vice President □Vice President □ Secretary □ Treasurer □ Secretary □Treasurer Other _____ □ Other _____ □ Other _____ □Other _____ Chairman Name: _____ □ Chairman Address: □Vice Chairman Address: □Vice Chairman ☐ Director □Director □ President □ President □ Vice President □Vice President □Treasurer □ Treasurë? □ □ Secretary □ Secretary □Other _____ Other ___ □ Other _____ □ Other _____ □ Chairman □Chairman Name: _____ ☐ Vice Chairman Address: □Vice Chairman Address: □ Director □ Director □ President □ President □ Vice President □Vice President □ Secretary □Treasurer □ 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. Signature of Director or Officer

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.

Tim Anderson - Owner



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: TIMOTHY E ANDERSON INCORPORATED

Entity No.: 2697270 Registration Date: 01/24/2005

Entity Type: Stock Corporation - Out of State - Stock

Formed In: NEVADA Status: Active

The above referenced entity is active on the Secretary of State's records and is qualified to transact intrastate business in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of July 25, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 132638931

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.



July 14, 2023

TIM ANDERSON 840 APOLLO ST, SUITE 100 EL SEGUNDO, CA 90245 US

SUBJECT: TIMOTHY E ANDERSON INCORPORATED

Ref. Number: W23000078592

We have received your document for TIMOTHY E ANDERSON INCORPORATED. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Operations Manager A

RECEIVED
JUL 2 8 2023

Letter Number: 123A00015686

À.



June 5, 2023

TIM ANDERSON 840 APOLLO ST, SUITE 100 EL SEGUNDO. CA 90245 US

SUBJECT: TIMOTHY E ANDERSON INCORPORATED

Ref. Number: W23000078592

We have received your document for TIMOTHY E ANDERSON INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 323A00012721

Corey Pettway
Regulatory Specialist II

www.sunbiz.org