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T. LEMIEUX AUG - 7 2023

## COVER LETTER

10:	Division of Corporations				
SUBJE	ECT: DESIGN TECH, INC.				
		Name of	corporation -	must include su	ffix
Dear Si	r or Madam:				
"Certific	closed "Application by Foreign Coate of Existence," or "Certificate eferenced foreign corporation to	of Good S	tanding" and	check are subm	
Please	return all correspondence conce	rning this i	matter to the f	ollowing:	
NADER	TOMASBI				
		Nai	me of Person		
DESIGN	TECH, INC.				
		Fir	m/Company		
2301 GL	ILF OF MEXICO DR, UN 86N				
			Address		
LONGBO	DAT KEY, FL 34228				
		City/St	ate and Zip co	ode	
NADER@	@DESIGNTECHINC.NET				
	E-mail address:	(to be use	for future ar	nual report notifi	cation)
For furt	her information concerning this n	natter blea	ase call:		
		, p.o.	200 0011.		
NADED	TOMASBI	o.t	E74	270 2440	
NADER	Name of Person	at	574 Area Code	370-3419 Daytime Te	elephone 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 n	ed is a check for the following am nake check payable to: FLORIDA DE 00 Filing Fee S78.75 Fili Certificate	PARTMEN ng Fee &	<b>\$78.7</b>	5 Filing Fee & ed Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 20, 2023

NADER TOMASBI 2301 GULF OF MEXICO DR UN 86N LONGBOAT KEY, FL 34228

SUBJECT: DESIGN TECH, INC. Ref. Number: W23000037894

We have received your document for DESIGN TECH, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 923A00006427

RECEIVED

## 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.

DESIGN TECH, INC.

1. DESIGN TECH			
	corporation;    must include "INCORPORATED." "CC orp." "Inc." "Co." or "Corp.")	OMPANY,"	"CORPORATION,"
Design	Tech Florida, Inc.		
(If name unavai	Tech Florida, Inc. lable in Florida, enter alternate corporate name ad	opted for th	e purpose of transacting business in Florida)
2. <u>IN</u>	untry under the law of which it is incorporated)	3	20-5249543
(State or co	untry under the law of which it is incorporated)		(FEI number, if applicable)
4	7/20/2006	5	
(	Date of incorporation)		(Date of duration, if other than perpetual)
5.	• • •	/2022	
J			
J	(Date first transacted business (SEE SECTIONS 507.1501 & 607.15		
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.11 MEXICO DR UNIT 86N , LONGBOAT KEY FL 34	502, F.S., t 228	o determine penalty liability)
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	502, F.S., t 228	o determine penalty liability)
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.11 MEXICO DR UNIT 86N , LONGBOAT KEY FL 34	502, F,S., t 228 e <b>street</b> ad	o determine penalty liability)  dress)
7. <u>2301 GULF OF</u>	(Date first transacted business (SEE SECTIONS 607.1501 & 607.15 MEXICO DR UNIT 86N , LONGBOAT KEY FL 342 (Principal office	502, F.S., t 228 e <b>street</b> ad address, if	dress)
7. <u>2301 GULF OF</u>	(Date first transacted business (SEE SECTIONS 607.1501 & 607.15 MEXICO DR UNIT 86N , LONGBOAT KEY FL 34: (Principal office) (Current mailing a	502, F.S., t 228 e <b>street</b> ad address, if	dress)
7. 2301 GULF OF	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1501	502, F.S., t 228 e <b>street</b> ad address, if	dress)
7. 2301 GULF OF  B. Name and str	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1501	502, F.S., t 228 e <b>street</b> ad address, if	dress)

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.

(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.

## DESIGN TECH, INC. 20-5249543 ATX1 A. DIRECTORS Chairman Name: Chairman Name: Vice Chairman Vice Chairman Address: \_\_\_\_\_ Address: Director Director NADER TOMASBI X President President Vice President Vice President Treasurer Secretary Secretary Treasurer Other \_\_\_\_\_ Other Other \_\_\_\_ Chairman Chairman Name: \_\_\_\_\_ Name: Vice Chairman Address: Vice Chairman Address: Director Director President President Vice President Vice President Treasurer Secretary Treasurer \_\_Secretary Other \_\_\_\_ Other Other \_\_\_\_ Chairman Name: Chairman Name: Vice Chairman Vice Chairman Address: Address: Director Director President President Vice President Vice President Secretary Treasurer Secretary Treasurer Other 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.

13. NADER TOMASBI

## State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

DESIGN TECH, INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on July 20, 2006, and was in existence or authorized to transact business in the State of Indiana on July 21, 2023.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, July 21, 2023

Diego Morales

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

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All certificates should be validated here: https://bsd.sos.in.gov/ValidateCertificate

Expires on August 20, 2023.