## F23000005109

	(Requestor's Name)	· · · · ·			
	(Address)				
١	(Address)				
	(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL			
	(Business Entity Name)				
ł	(Document Number)				
Certified Copies	Certificates of S	Status			
Special Instructions to Filing Officer.					
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2023 AUG 24 AM 9: 08 SECRETARY OF STATE

## **COVER LETTER**

TO:		ration Secon of Cor	ction porations				
SUBJ	ECT:	DIRECT	PACK, INC.				
	·         =	-		of corporation	n - mu	st include suffix	
Dear S	ir or Ma	dam:					
"Certif	ficate of	Existence		of Good Sta	nding`	and check are subi	et Business in Florida," mitted to register the
Please	return al	l corresp	ondence concerni	ng this matte	r to th	e following:	
Denise	Morris						
				Name of	Perso	on	
DIREC	T PACK	, INC.					
				Firm/Cor	npany		
12243	Branford	St.					
				Addı	ess		
Sun Va	illey. CA	91352					
				City/State a	and Zi	p code	<u></u>
deniser	norris@p	meglobali	nc.com/sonianavarr				
			E-mail address:	to be used	for fu	ture annual report n	otification)
For fur	ther info	rmation (	concerning this ma	atter, please	call:		
Denise	Morris			at ( 818	81	96-1101 x 327	
	Name	of Persor	1	Area Coo	le	Daytime Teleph	none 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 r		ck payable	he following amo to: FLORIDA DE 578.75 Filing Certificate o	PARTMENT g Fee & [	□ \$78	STATE .75 Filing Fee & tified 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.

(If name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of transacting	ng business in Florida)	-
2. Delaware	y under the law of which it is incorporated)	74-3190997 (FEI number, if ap	-	
	•	•	pheadicy	
4. August 9, 2006 (Date	of incorporation) 5	Perpetual (Date of duration, if other	-	
6.	•	·	. , ,	
o		in Florida, if prior to registration) 1502, F.S., to determine penalty liabil	ity)	-
7. 12243 Branford S	St., Sun Valley, CA 91352			_
	(Principal of	fice street address)		
8. Name and <u>stree</u>	2023 AUG 24 SECRETAR TALLAH			
Name:	×			
Office Address:	1201 Hays Street		AM 9: 08 OF STATE SSEE, FL	· knased
	Tallahassee (City)	Florida 32301(Zip code)	ATE 08	
Having been nam designated in this further agree to c	ent's acceptance:  ned as registered agent and to accept served application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my p	vice of process for the above state tment as registered agent and agr relative to the proper and comple	ee to act in this capa	city. I

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

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

## A. DIRECTORS Name: Peter Gamboa Chairman □ Chairman Name: Address: 12243 Branford St. ☐ Vice Chairman □ Vice Chairman Address: Sun Valley, CA 91352 □Director □ Director ☐ President □President □Vice President □ Vice President Treasurer ☐ Secretary □ Secretary ☐ Treasurer □Other \_\_\_\_\_ □Other □Other \_\_\_\_\_ Other\_\_\_\_\_ □ Chairman ☐ Chairman Name: Address: \_\_\_\_\_ □Vice Chairman Address: ☐ Vice Chairman □ Director □ Director □President □ President □ Vice President ☐ Vice President ☐ Secretary □ Treasurer ☐ Secretary ☐ Treasurer □Other \_\_\_\_\_ Other \_\_\_\_\_ □Other \_\_\_\_\_ □ Other \_\_\_\_\_ Name: \_\_\_\_\_ □ Chairman □Chairman □ Vice Chairman Address: ☐ Vice Chairman Address: ☐ Director □ Director □President □ President ☐ Vice President ☐ Vice President ☐ Secretary □ Treasurer □ Secretary □Treasurer □ Other \_\_\_\_\_ □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.



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

DELAWARE, DO HEREBY CERTIFY "DIRECT PACK, 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 SEVENTH DAY OF AUGUST, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIRECT PACK, INC." WAS INCORPORATED ON THE NINTH DAY OF AUGUST, A.D. 2006.

THE STATE OF THE S

Authentication: 203913817

Date: 08-07-23