# F23000005844

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
<u> </u>





500416564195

2023 OCT 11 PM 5: 31

2023 OCT 11 AM 9: 51

OCT 11 2023 K. Brumbley

## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

NTITY NAME FORTIS	ET FIDUS, INC.	
OCUMENT NUMBER_		
	**PLEASE FILE THE ATTACHED AND RETURN**	
	Plaix Copy	
<u>XXXXX</u>	Certified Copy	
	Certificate of Status	
**	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Amendments	
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)	
	Certificate of Status	
····	Certificate of Status Reflecting:	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINAT		
NUMBER OF CERTIFICAT	ES REQUESTED	
готаl owed <u>\$</u> 78.75	ACCOUNT # I20140000108 United Corporate  Services, Inc.	mad

#### 

#### **COVER LETTER**

	stration Section ion of Corporations	;			
SUBJECT:	FORTIS ET FIDUS	, INC.			
O'CBOLCI.	***	Name of corporati	on - must i	nclude suffix	
Dear Sir or M	ladam:				
"Certificate of	f Existence," or "Co		anding" ar	id check are sub	et Business in Florida," mitted to register the
Please return	all correspondence	concerning this mat	ter to the fe	ollowing:	
		Name o	of Person	· · -	
EMMANUEL.	NASR				
	-	Firm/Co	ompany		
C/O JACKOV	VAY AUSTEN TYEF	RMAN et al			
***		Ade	dress		
1925 Century	Park East, 22nd Floor	. Los Angeles, CA 90	067		
		City/State	and Zip c	ode	
enasr@jtwam			_		
,	E-mai	l address: (to be use	d for future	e annual report n	otification)
For further in	formation concerni	ng this matter, please	e call:		
EMMANUEL	NASR	at ( 310	553-	0305	
Nam	e of Person	Area Co	ode	0305 Daytime Telepl	hone Number
Regis Divis The 0 2415	EET/COURIER A stration Section tion of Corporations Centre of Tallahasse N. Monroe Street. hassee, FL 32303	ee		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
	ing Fee 🔲 \$78	ving amount: RIDA DEPARTME: .75 Filing Fee & tificate of Status	□ \$78.75	ATE Filing Fee & ed 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.

1. FORTIS ET FIL	DUS, INC.		
(Enter name of c "Inc.," "Co.," "C	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp,")	'COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transacting t	ousiness in Florida)
2. CALIFORNIA	74		
(State or countr	y under the law of which it is incorporated)	(FEI number, if appli	cable)
09/03/1001			
(Date	of incorporation) 5	(Date of duration, if other tha	n perpetual)
6. OCTOBER 20.			
· ·	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) , F.S., to determine penalty liability)	
7. 1925 Century Par	k East, 22nd Floor, Los Angeles, CA 90067		
	(Principal office	street address)	
Name:	(Current mailing a st address of Florida registered agent: (P.O. Eunited Corporate Services, Inc.  3458 Lakeshore Drive	address, if different)  Box <u>NOT</u> acceptable)	FILED 5: 2028 OCT 1.1 PM 5: 247
Office Address:		, Florida_32312	<u> </u>
	(City)	(Zip code)	
designated in this further agree to co	·	of process for the above stated co it as registered agent and agree t tive to the proper and complete p	o act in this capacity.
	(Registered agent's signa	ature)	
10. Attached is a c	certificate of existence duly authenticated, no	t more than 90 days prior to deliv	ery of this application

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				
□Chairman	· · · · · · · · · · · · · · · · · · ·		Name:	
□ Vice Chairman	Address: 1925 Century Park East,	☐ Vice Chairman	Address:	
Director	22nd Floor, Los Angeles, CA 90067	□Director		
President		□President		
□Vice President		□Vice President		
■ Secretary	<b>■</b> Treasurer	☐ Secretary		☐ Treasurer
□Other	Other	□Other	<del></del>	□Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		Director		
□President		□President	<del></del>	
□Vice President		□Vice President		. <u>.</u>
Secretary	☐ Treasurer	☐ Scoretary		Treasurer
□Other	Other	□Other		Other
□Chairman	Name:	□Chairman	Name:	•••
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director _		Director		
]President		□President		
□Vice President _	. <u></u>	☐ Vice President		
☐Secretary	☐Treasurer	□Secretary		□Treasurer
□Other		□Other		□Other
mportant Notice: Undividuals may be a	se an attachment to report more than six (6). The added to the index when filling your Florida Department of Direct Signature of Direct	e attachment will be imaged artment of State Annual Rep eter or Officer	ort form.	

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. KYLE MACLACHLAN, AS ITS PRESIDENT



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

Entity Name: FORTIS ET FIDUS, INC.

**Entity No.**: 1693293 **Registration Date**: 08/02/1991

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges 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.

CALIFORNAL CALIFORNAL

**IN WITNESS WHEREOF**. I execute this certificate and affix the Great Seal of the State of California this day of September 27, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 148448945

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.