# F23000006263

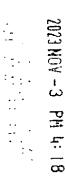
(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nam	ne)				
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

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#### SAFETY STEP TD, Inc.

#### ADDITION TO THE COVER LETTER- REQUEST FOR REFUND

The attached application is to take the place of a previously rejected application.

W 23000129063.

This would result in a refund of the previous payment received.

Please apply \$ 87.50 Filing fee for Certificate of Status & Certified Copy.

Please refund the remaining funds to: Safety Step TD, Inc. P.O. Box 9027 Redlands, CA 92373

If you have any questions or comments, I can be reached on my cell at (305) 340-9872

Suzanne Meierer

Safety Step TD, Inc.

Florida Office

3121 Opportunity Court

Suite E

South Daytona, Florida 32119

Suzanne@safetysteptd.com

(305)340-9872

#### COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	SAFETY STEPTD, INC.		
SUBJE		of corporation	must include suffix
Dear Si	r or Madam:		
"Certifi		of Good Stand	outhorization to Transact Business in Florida," ling" and check are submitted to register the s in Florida.
Please	return all correspondence concerni Suzanne Meier		to the following:
	- · · · <del> · · · · · · · · · · · · ·</del>	Name of I	erson
	Safety Step TI	), Inc.	
		Firm/Com	pany -
	3121 Opportuni	ty Court Suite	E
		Addre	ss
	South Daytona,	Florida 32119	
		City/State ar	d Zip code
	Suzanne@safety	steptd.com	
	E-mail address	: (to be used for	or future annual report notification)
For fur	ther information concerning this m	atter, please c	ill:
Suz	zanne Meierer	305	340-9872
	Name of Person	Area Code	Daytime Telephone Number
	STREET/COURIER ADDRES 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	ed is a check for the following amonake check payable to: FLORIDA DI .00 Filing Fee	epartment g Fee & - C	OF STATE  \$78.75 Filing Fee &  Certified Copy  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.

(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	adopted for the purpose of transacting	business in Florida)
Califomia	3	20-8793931	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)	
March 29, 2007	5.	Perpetual	
(Date	of incorporation)	(Date of duration, it other th	ian perpetual)
		n Florida, if prior to registration) 502, F.S., to determine penalty liability	v)
	I SEE SECTIONS BUT INDEAS BUT I		
1725 Howard		Jos., 1.5., to determine policity macrin.	,,
1725 Howard	Place Redlands, California 92373	ice street address)	
	Place Redlands, California 92373		
-	Place Redlands, California 92373  (Principal off Redlands, Ca. 92373		
P.O. Box 9027	Place Redlands, California 92373  (Principal off Redlands, Ca. 92373  (Current maili	nce street address) ng address, if different)	
P.O. Box 9027	Place Redlands, California 92373  (Principal off Redlands, Ca. 92373	nce street address) ng address, if different)	
P.O. Box 9027	Place Redlands, California 92373  (Principal off Redlands, Ca. 92373  (Current maili	nce street address) ng address, if different)	20 NON 5707
P.O. Box 9027	Place Redlands, California 92373  (Principal off Redlands, Ca. 92373  (Current mailing address of Florida registered agent: (P.C.)	nce street address) ng address, if different)	
P.O. Box 9027  Name and stree  Name:	Place Redlands, California 92373  (Principal off Redlands, Ca. 92373  (Current mailing address of Florida registered agent: (P.C. Suzanne Meirerer	nce street address) ng address, if different)	2- 40N CAC

(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.

A. DIRECTORS			
□Chairman	Michael Menendez.	ClChairman	Robert Hager Name:
∐Vice Chairman	Address 1725 Howard Rd	□Vice Chairman	Address:
Director	Redlands, Ca. 92373	Director	Redlands, Ca. 92373
7President		□President	
Wice President		■ Vice President	
Secretary	☐1 reasurer	☐ Secretary	□Treasurer
Other	□Other	Other	Other
∃Chairman	Name:	□Chairman	Name:
l Vice Chairman	Address:	□Vice Chairman	Address:
Director		□Director	
President	**************************************	□President	
Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	□Other	Other	Other
] Chairm <b>an</b>	Name:	□Chairman	Name:
Vice Chairman	Address:	□Vice Chairman	Address:
Director		□Director	
President		□President	
Vice President		□ Vice President	
Secretary	☐'Treasurer	□ Secretary	□Treasmer
iOther	Other	Other	Other
inportant Notice: idividuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Depa	artment of State Annual Re	d for reporting purposes only. Non-indexed eport form.
	Signature of Direc	ctor or Officer	
he is aware that fa .317.155, F.S.	ctor signing this document (and who is listed in null also information submitted in a document to the De	epartment of State constitu	
<i>'</i>	ROBERT HAGEN VICE 1	PRESIDENT	



## Secretary of State Certificate of Status

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

Entity Name: SAFETY STEP TD, INC.

Entity No.: 2946670 Registration Date: 03/28/2007

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.



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

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 154883936

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.