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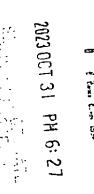
(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
				

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COVER LETTER

•	tration Sectio ion of Co rp ora				
SUBJECT:	Inspector Nat	on Inc.			
		Name of corporati	ion - mus	st include suffix	
Dear Sir or M	adam:				
"Certificate o	f Existence," o	by Foreign Corporation for "Certificate of Good Surporation to transact busing	tanding"	and check are sub	
Please return	all correspond	ence concerning this mat	ter to the	following:	
April Gregory					
		Name	of Persor	1	
Inspector Natio	on Inc.				
		Firm/Co	ompany		
2579 Eric Land	e, Unit B				
		Ad	dress		
Burlington, NO	27215				
		City/State	and Zip	code	
aprilgreg l l@g	mail.com				
	F	-mail address: (to be use	d for futi	are annual report i	notification)
For further inf	formation con-	cerning this matter, pleas	e call:		
April Gregory		at (38	0-7811	
Name	of Person	Area Co		Daytime Telep	hone 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		
	eck payable to:	Following amount: FLORIDA DEPARTMENT \$78.75 Filing Fee & Certificate of Status	□ \$78.	FATE 75 Filing Fee & ified Copy	S87.50 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 ad	opted for the purpose of transacting	g business in Florida)	
North Carolina 3.		88-4163006		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
October 14, 202	2 5			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
N/A				
2579 Eric Lane. U	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150) Jnit B, Burlington NC 27215		(y)	
				
	(Principal office	street address)		
	(Principal office	street address)		
		address, if different)		
		address, if different)	20 31	
Name:	(Current mailing et address of Florida registered agent: (P.O.	address, if different)	2023 OC	
Name:	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC	address, if different) Box NOT acceptable)	2023 OCT 3,	
Name:	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC 7901 4th St N STE 300 St. Petersburg	address. if different) Box NOT_acceptable) , Florida 33702	2023 OCT 31 P	
Name:	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC 7901 4th St N STE 300 St. Petersburg (City)	address, if different) Box NOT acceptable)	2023 OCT 31 PH 6	
Name: ffice Address: Registered age	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance:	address, if different) Box NOT acceptable) , Florida 33702(Zip code)	2023 OCT 31 PH 6: 2	
Name: ffice Address: Registered age aving been nam	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC 7901 4th St N STE 300 St. Petersburg (City)	address. if different) Box NOT acceptable) , Florida 33702(Zip code) of process for the above stated	corporation at the p	
Name: ffice Address: Registered age aving been names in this orther agree to contact the contact that the contact the contac	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes rele	address, if different) Box NOT acceptable) , Florida 33702, Florida (Zip code) of process for the above stated nt as registered agent and agreative to the proper and complete	corporation at Be p e to act in this capac	
Name: ffice Address: Registered age aving been names in this orther agree to contact the contact that the contact the contac	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme	address, if different) Box NOT acceptable) , Florida 33702, Florida (Zip code) of process for the above stated nt as registered agent and agreative to the proper and complete	corporation at Be p e to act in this capac	
Name: ffice Address: Registered age aving been nam esignated in this arther agree to co and I am familiar	(Current mailing et address of Florida registered agent: (P.O. Northwest Registered Agent, LLC 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes rele	address, if different) Box NOT acceptable) , Florida 33702, Florida (Zip code) of process for the above stated nt as registered agent and agreative to the proper and complete	corporation at Be p e to act in this capac	

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 Vice Chairman Director President Vice President	Name: Bonnie Gregory Address: 2579 Eric Linguis B Burlington, NC 27215	□Chairman □Vice Chairman □Director □President □Vice President	Thomas S. Gregory V Name: 2579 Eric Ln., Unit B Address: Burlington, NC 27215
□Secretary	□Treasurer	□Secretary	☐ Treasurer
□Other	Other	□Other	Other
□Chairman □Vice Chairman ■Director	Name:	□Chairman □Vice Chairman □Director	Name:Address:
□President		□President	
□Vice President		□Vice President	
☐ Secretary Chief Exc Other	□Treasurer ecutive Officer □Other	■Secretary General C	□Treasurer Counsel □Other
□ Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	-
Secretary	□Treasurer	□Secretary	□Treasurer
□Other	Other	Other	Other
individuals may be	Jse an attachment to report more than six (6). The a added to the index when filing your Florida Depart Signature of Director signing this document (and who is listed in numerous).	ment of State Annual Report of Officer	port form.

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 of 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.

3 Bonnie Gregory, President



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do nereby certify that

INSPECTOR NATION INC.

is a corporation duly incorporated under the laws of the State of North Carolina, naving been incorporated on the 10th day of October, 2022, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of October, 2023.

Elaine I. Marshall

Secretary of State