F23000006299

(Requestor's Name)					
(Address)					
(Address)					
(1001000)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
W23000 141 902					

Office Use Only

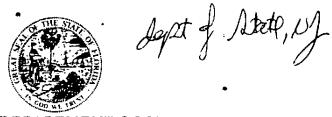


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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 16, 2023

SANDRA REDER 2452 MARJA STREET THE VILLAGES. FL 32163 US

SUBJECT: SDR ELECTRICAL CONTRACTORS, INC.

Ref. Number: W23000141902

We have received your document for SDR ELECTRICAL CONTRACTORS, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/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.

Andrea Andrews
Regulatory Specialist II

Letter Number: 923A00023999

RECEIVED

OCT 3 0 2023

COVER LETTER

TO:		ration Section of Corpo						
SUBJ	ECT:	SDR	Electrical	Cont	ractors the			
			Name of co	orporation	ractors Inc	<u> </u>		
Dear S	ir or Ma	dam:						
"Certif	icate of	Existence,		Good Stanc	ling" and check are sub	et Business in Florida," mitted to register the		
Please	return al	l correspo	ndence concerning t	his matter	to the following:			
	San	din R	ede					
			eda	Name of F	erson			
	501	? Ele	itrical Con-	Tracta	s Inc			
	<u>245</u>	2 ma	rta stree		d Zip code			
	ŀ			Addre	SS			
	The	Villag	es FL 3	32163				
	1	0	Ci	ity/State an	d Zip code			
	Kin	12280	E-mail address: (to	tonet	or future annual report r	notification)		
						RATION)		
For fur	ther info	mation co	oncerning this matte	r, please ca	ilt:			
λ_{Δ}	malre.	Rol_		ans	797.704	1		
<u> </u>		of Person	ai (Area Code) 797-204 Daytime Telepl	hone Number		
			IER ADDRESS:	MAILING ADDRESS:				
Registration Section Division of Corporations					Registration Section Division of Corporations			
The Centre of Tallahassee					P.O. Box 6327			
		. Monroe S issee, FL	Street, Suite 810 32303		Tallahassee, F	L 32314		
			e following amount					
			o: FLORIDA DEPA S78.75 Filing Fe			□ 607.60 FH F		
4/0.	.00 Filin	g rec	Certificate of St		\$78.75 Filing Fee & Certified 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.

"Inc.," "Co.," "Corp." "Inc," "Co," or "Corp.")	CCTOS, TAC ORPORATED," "COMPANY," "CORPORATION,"	
	corporate name adopted for the purpose of transacting business in Florida)	
(State or country under the law of which it is in	3. 22-3297855 (FEI number, if applicable)	
_	5	
(Date of incorporation)	(Date of duration, if other than perpetual)	
(SEE SECTIONS 607.	cted business in Florida, if prior to registration) 7.1501 & 607.1502, F.S., to determine penalty liability)	
1. a 13 × 11 a 1 3 5 1 e e t	(Principal office street address)	
((Current mailing address, if different)	
8. Name and street address of Florida registere Name: SANDIA Rede	· · · · · · · · · · · · · · · · · · ·	;;;;
Office Address: JY52 Marta S	ω Στ. σοί	·
the Villages (City)	. Florida 32/63	ع ؤ حيب رسيس
designated in this application, I hereby accept further agree to comply with the provisions of	o accept service of process for the above stated corporation at the pla t the appointment as registered agent and agree to act in this capacity f all statutes relative to the proper and complete performance of my d	y. <i>1</i>
and I am familiar with and accept the obligati	ions of my position as registered agent.	

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.

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

a. Directors		· •				
□Chairman	Name:			□Chairman	Name:	
□Vice Chairman	Address:			□Vice Chairman	Address:	
□Director				□Director		
President	Jeffrey Reder			□President		
A Vice President	2452 Marja Street, The Villages, FL 32163			□Vice President		
□Secretary		☐ Treasurer		Secretary		□Treasurer
Other		Other		□Other		Other
☐ Chairman	Name:			□ Chairman		
□Vice Chairman	Address:			□Vice Chairman	Address:	
Director				□Director		
□President		2452 mar Ja Sti		□President	·	
DVice President	Sandra Reder	The Villages FL		□Vice President		
□Secretary		☐Treasurer		☐ Secretary		□Treasurer
□Other		□Other	-	□Other		□Other
□ Chairman	Name:		•	□Chairman		
□Vice Chairman	Address:		-	□ Vice Chairman	Address:	, <u>, , , , , , , , , , , , , , , , , , </u>
□Director			-	□Director		
□President			-	□President		
□Vice President			-	□Vice President		- <u></u>
☐ Secretary		□Treasurer		□Secretary		□Treasurer
Other		□Other	-	Other		□Other
Important Notice: individuals may b	e added to the inde	to report more than six (6). ' x when filing your Florida D	epartme	nt of State Annual R	eport form.	
12.		Signature of D	rector o	r Officer		
The officer or dire she is aware that I s.817.155. F.S.	false information su	ocument (and who is listed in braitted in a document to the	i numbei Departi	· 11 above) affirms t nent of State constit	hat the facts state utes a third degre	d herein are true and that he or e felony as provided for in

(Typed or printed name and capacity of person signing application)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

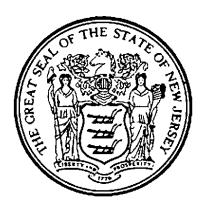
SDR ELECTRICAL CONTRACTORS INC. 0100583079

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on March 29, 1994.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

SANDRA REDER 12 BUCKINGHAM CIRCLE BELVIDERE, NJ 07823



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 24th day of October, 2023

der A Mun

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6147686822

Verify this certificate online at

https://www.l.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp