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#### **CT CORP**

#### (850) 656- 4724 3558 lakesore Drive Tallahassee, FL 32312

12/15/2023

Date:

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		Acc#I20160000072	
Name:	METREA ST	RATEGIC MOBILITY	/ INC.
Document #:			
Order #:	71125762		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination:  Number of Certs:	
Filing: 🚺	Certified: Plain: COGS:		Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	70.00	

Thank you!

### COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Metrea Strategie Mobility Inc.	
Name of corporation -	must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Astronomy Certificate of Existence." or "Certificate of Good Standiabove referenced foreign corporation to transact business	ng" and check are submitted to register the
Please return all correspondence concerning this matter to	the following:
Name of Pe	erson
Firm/Comp	any
Addres	s
City/State and	d Zip code
jdp@metrea.aero  E-mail address: (to be used fo	r future annual report notification)
For further information concerning this matter, please ca	11:
Name of Person Area Code	Daytime Telephone 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
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTMENT  \$70.00 Filing Fee \$\Bigcup \$78.75 Filing Fee & \$\Bigcup\$  Certificate of Status	OF STATE  \$78.75 Filing Fee &  Certified Copy  Certified Copy  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 Metrea Strategic	Mobility Inc.			
(Enter name of co "Inc.," "Co" "Co	orporation; must include "INCORPORATED," orp." "Inc." "Co." or "Corp.")	` "COMPANY," "CORPORATION.	<b>"</b>	
(1C)	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)	
			,	
California 3. 34-		34-2004388 (FEI number, if app	diaghle)	
(State or country	y under the law of which it is incorporated)	(PET HUMOCI, II APP	incasic)	
4. 06/04/2004		Perpetual		
(Date	of incorporation)	(Date of duration, if other tr	ate of duration, if other than perpetual)	
6. 08/19/2020				
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502. F.S., to determine penalty liabilit	у)	
7 41955 4th Street 5	Suite 310, Temecula, CA 92590			
	(Principal offi	ice <u>street</u> address)		
ruma.				
same	(Current mailir	ng address, if different)		
8. Name and street	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	2023 DEC 15	
Name:	C T Corporation System		5 J	
Office Address:	1200 South Pine Island Road	<u></u>	i mara di	
	Plantation	, Florida <u>33324</u>	PH 12:	
	(City)	(Zip code)	; · <b>'.</b> Ω	
Having been nan designated in this further agree to c and I am familia	ent's acceptance: ned as registered agent and to accept serves application, I hereby accept the appointments with the provisions of all statutes for with and accept the obligations of my poor CT Corporation System  y: /s/ Sandra Zwijack, Assistant Secre	ment as registered agent and agre relative to the proper and complet osition as registered agent. ctary	ge to act in this capacity. T	
	(rec2)serves agein a r	, , , , , , , , , , , , , , , , , , ,		

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.

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

#### A. DIRECTORS Name: \_Emmanuel A. Carousos Name: \_\_\_\_\_ Chairman □ Chairman Address: 41955 4th Street Suite 310 Address: \_\_\_\_ ☐ Vice Chairman ☐ Vice Chairman Temecula, CA 92590 □ Director **■**Director □President □ President ☐ Vice President □Vice President \_\_\_ □ Treasurer □ Secretary ☐Treasurer □ Secretary ☐Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: Daniel J. Heires □ Chairman Name: \_\_\_\_\_ □ Chairman □Vice Chairman Address: 41955 4th Street Suite 310 Address: \_\_\_\_\_ □ Vice Chairman Temecula, CA 92590 □ Director Director □President President □Vice President □Vice President \_\_\_\_\_\_ ☐ Treasurer □ Secretary □Treasurer □ Secretary □Other \_\_\_\_\_ ☐Other \_\_\_\_\_ □Other \_\_\_\_\_\_ □Other \_\_\_\_\_ Name: \_\_\_\_\_ Name: Jon T. Thomas □ Chairman ■Chairman Address: 41955 4th Street Suite 310 Address: \_\_\_\_\_ □Vice Chairman ☐Vice Chairman Temecula, CA 92590 Director □Director □President □President □ Vice President □ Vice President ☐ Treasurer □ Secretary ☐ Treasurer Secretary ●Other \_CFO □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. 13. Daniel J. Heires, President



## Secretary of State Certificate of Status

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

Entity Name:

METREA STRATEGIC MOBILITY INC.

Entity No.:

2660181

Registration Date: 06/04/2004

Stock Corporation - CA - General

Entity Type: 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 December 14, 2023.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 166073629

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.