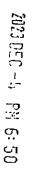
# F24000000084

Office Use Only



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### **COVER LETTER**

	stration Section sion of Corporations						
SHBJECT:	Brockman Engineering Inc.						
	Name of corporation - must include suffix						
Dear Sir or M	1adam:						
"Certificate o		ite of Good Standin	thorization to Transact Business in Florida." g" and check are submitted to register the n Florida.				
Please return	all correspondence concer	ming this matter to	the following:				
Stephen Brock	aman						
		Name of Per	son				
Brockman Eng	gineering Inc.						
<del>10</del> :	••	Firm/Compar	ny				
6881 Comptor	ı Ln S						
		Address					
Naples FL 341	104						
<del></del>		City/State and 2	Zip code				
steve@brockn	nanengineering.us						
<del> </del>	E-mail addre	ess: (to be used for	future annual report notification)				
For further in	formation concerning this	matter, please call:					
Stephen Brock	cman 	at ()	718-7265				
Nam	ne of Person	Area Code	Daytime Telephone Number				
Regis Divis The G 2415	EET/COURIER ADDRE stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 8 shassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
	check for the following ar heck payable to: FLORIDA		STATE				

□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee & ■ \$87.50 Filing Fee,

### 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.

Brockman Engi	neering Inc.				
	orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATIO	, NO.		
(If name unavail	able in Florida, enter alternate corporate name add	pted for the purpose of transact	ing business in Florida)		
2.	3.				
(State or country under the law of which it is incorporated)		(FEI number, if applicable)			
<b>1</b> .	5				
(Date	(Date of incorporation) 5. (Date of		Date of duration, if other than perpetual)		
11/30/2023					
)	(Date first transacted business in FI	orida, if prior to registration)			
	(SEE SECTIONS 607.1501 & 607.1502	F.S., to determine penalty liab	ility)		
6881 Compton L	n S Naples FL 34104				
·	(Principal office	street address)			
			0		
	(Current mailing a	ddress, if different)			
	(0	,	23 D		
R. Name and stree	et address of Florida registered agent: (P.O. E	lov NOT accentable)	2023 DEC		
s. Ivame and <u>succ</u>		ox <u>1101</u> acceptable)	: <u>1</u>		
Name:	Stephen Brockman	_			
Office Address:	6881 Compton Ln S		. o.		
office Address.			் ச		
		Florida	. 0		
	(City)	(Zip code)			

### 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



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	Name:	□Chairman	Name:	
□Vice Chairman	Address: 6881 Compton Ln S	□Vice Chairman	Address:	
□Director	Naples FL 34104	□Director		
<b>■</b> President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	Secretary		□Treasurer
□Other	Other	□Other		□Other
□Chairman	Stephen Brockman	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	Naples FL 34104	□Director		
□President		□President		
□Vice President		□Vice President		
■ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other		Other		Other
□Chairman	Name:	□Chairman		- · <u>-</u>
□Vice Chairman	Address:	□ Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		□Other
Important Notice	Use an attachment to report more than six (6). The attachment to	chment will be image nt of State Annual Re	d for reporting preport form.	urposes only. Non-indexed
individuals may be	added to the index when filing your Florida Departme			
individuals may be	Signature of Director of			

The officer or director signing this document (and who is fisted 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 \$8.817.155, F.S.

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

### BROCKMAN ENGINEERING INC.

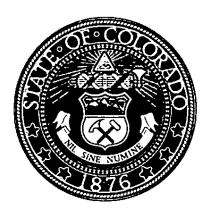
#### is a

### Corporation

formed or registered on 09/19/1991 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19911074881.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/28/2023 that have been posted, and by documents delivered to this office electronically through 11/30/2023 @ 13:18:15.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 11/30/2023 @ 13:18:15 in accordance with applicable law. This certificate is assigned Confirmation Number 15529787



Secretary of State of the State of Colorado

\*End of Certificate\*\*\*\*\*\*\*\*\*\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, https://www.coloradosov.gov/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, https://www.coloradosos.gov/click"Businesses, trademarks, trade names" and select "Frequently Asked Questions."