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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 : (323)962-8600 Phone Fax Number : (323)389-0502

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION REYK TECH INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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Help

From: Tatyana Reid

COVER LETTER

	stration Section Sion of Corporations			
SUBJECT:	REYK TECH INC.			
SOBJECT.	Name of	corporation	- must include suffix	
Dear Sir or A	fadam:			
"Certificate o	"Application by Foreign Corp of Existence," or "Certificate of need foreign corporation to train	f Good Stand	ling" and check are subr	
Please return	all correspondence concerning	this matter	to the following:	
Cheyenne Mo	selev			
		Name of P	'erson	
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		Addre	SS	,
Glendale, CA	91203			
		City/State an	id Zip code	
arni sigurdssoi	n@gmail.com			
	E-mail address: (to be used fo	or future annual report no	otification)
For further in	formation concerning this mat	ter, please ca	I I:	
Cheyenne Mo	iseley ai	800		
Nam	ne of Person	Area Code	Daytime Teleph	ione Number
Regis Divis The C 2415 Talla	EET/COURIER ADDRESS: stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hussee, FL 32303		MAILING AI Registration Sc Division of Co P.O. Box 6327 Tallahassee, Fi	ection rporations
	check for the following amounted payable to: FLORIDA DEP ing Fcc \$78.75 Filing Certificate of	ARTMENT (OF STATE \$78.75 Fiting Fee & Certified 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 add	opted for the purpose of transacti	ng business in Florida)			
New York		6-4882213				
(State or count	y under the law of which it is incorporated)	(FEI number, if applicable)				
02/06/2014	5.					
(Dat	e of incorporation)	(Date of duration, if other than perpetual)				
						
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150)		dite)			
100 S Ashley Di	Suite 600 Tampa, FL 33602					
	(Principal office	street address)				
	•					
	(Current mailing	nddress, if different)				
	(Current mailing	address, if different)				
Name and stre	(Current mailing et address of Florida registered agent: (P.O. I		20 Ss			
Name and stre			2024 J SECR			
Name:	et address of Florida registered agent: (P.O. I		2024 JAN 2 SECRETA			
Name:	et address of Florida registered agent: (P.O. I United States Corporation Agents, Inc. 476 Riverside Ave.	Box NOT acceptable)	2 7			
Name:	et address of Florida registered agent: (P.O. I United States Corporation Agents, Inc.		2024 JAN 24 PH SECRETARIOS SE			
Name: Fice Address:	United States Corporation Agents. Inc. 476 Riverside Ave. Jacksonville (City)	Box <u>NOT</u> acceptable) Florida				
Name: fice Address:	United States Corporation Agents. Inc. 476 Riverside Ave. Jacksonville (City)	Box NOT acceptable) Florida 32202 (Zip code)	PH 4:			
Name: fice Address; Registered agoving been namesignated in this	United States Corporation Agents. Inc. 476 Riverside Ave. Jacksonville (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme	Box NOT acceptable) Florida 32202 (Zip code) of process for the above state at as registered agent and ag	red corporation at the place to act in this capaci			
Name: fice Address: Registered ag wing been nan ignated in this ther agree to c	United States Corporation Agents. Inc. 476 Riverside Ave. Jacksonville (City) ent's acceptance: ned as registered agent and to accept service application. I hereby accept the appointme onuply with the provisions of all statutes relations.	Box NOT acceptable) Florida 32202 (Zip code) of process for the above state at a registered agent and agustive to the proper and completive to the proper and completing	red corporation at the place to act in this capaci			
Name: fice Address: Registered agaving been nan signated in this rther agree to c	United States Corporation Agents. Inc. 476 Riverside Ave. Jacksonville (City) ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme	Box NOT acceptable) Florida 32202 (Zip code) of process for the above state as registered agent and agentive to the proper and compliant as registered agent.	red corporation at the place to act in this capacite performance of my a			
Name: ffice Address: Registered ag aving been nan esignated in this rther agree to c	United States Corporation Agents. Inc. 476 Riverside Ave. Jacksonville (City) ent's acceptance: ned as registered agent and to accept service application. I hereby accept the appointme onuply with the provisions of all statutes relations.	Box NOT acceptable) Florida 32202 (Zip code) of process for the above state at as registered agent and agent to the proper and completion as registered agent. Cheyenne Mosel	red corporation at the place to act in this capacite performance of my a			

^{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.

To:

A. DIRECTORS ☐ Chairman ☐ Vice Chairman ☐ Director ✓ President ☐ Vice President	Address. Tampa, I	Arni Sigurdsson 1445 Harbour Walk Rd Ft. 33602		□ Chainnan □ Vice Chainnan □ Director □ President □ Vice President	Address:	
☐ Secretary		∰Treasurer		⊡ Secretary		☐ Treasurer
द्धा-Other				☐Other		COther
□ Chairman	Name:			⊡Chairman	Name:	
⊞.Vice Chairman	Address:			☐Vice Chairman	Address:	
☐ Director			 -			
☐ President				□President	 .	
□ Vice President				⊡Vice President		
□ Secretary		⊡'Treasurer		□ Secretary		□1 reasurer
⊕Other		⊡Other		⊡Other		☑Other
###Chairman	Name: _			□Chainnan	Name:	
BiVice Chairman	Address.		······································	□Vice Chairman	Address.	
型: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 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. 12. 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.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

1. ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: REYK TECH INC.

DOS ID Number: 4525148

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 02/06/2014

Statement Status: CURRENT Statement Due Date: 02/29/2024

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on January 17, 2024 at 12:42 P.M.

ROBERT J. RODRIGUEZ. Secretary of State

Brandon C Hughan

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100005016902 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov