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S. PC -- TT3 FE3 2 3 2024

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Track Tech INC			
	corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to transport to the corporation of the corporation to the	f Good Standi	ng" and check are submit	tusiness in Florida," ted to register the
Please return all correspondence concerning	g this matter to	the following:	
Mindy Henn			
	Name of Pe	erson	
Track Tech INC			
	Firm/Comp	any	
5109 Industrial Parkway			
	Addres	3	
Calvert City KY 42029			
	City/State and	Zip code	
info@tracktech.us			
E-mail address: ((to be used for	future annual report noti	fication)
For further information concerning this mat	ter, please cal	1:	
Mindy Henn	502 t (377-5647	
Name of Person	Area Code	Daytime Telephon	e 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 DEF S70.00 Filing Fee S78.75 Filing Certificate of	PARTMENT (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.

(Enter name of co	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED," "	COMPANY," "CORPORATIO	N,"
(If name unavaila	ible in Florida, enter alternate corporate na	ime ado	pted for the purpose of transacti	ng business in Florida)
Kentucky		3. 61-1257331		
(State or country	y under the law of which it is incorporated		(FEI number, if a	pplicable)
March 11, 1994		5.		
(Date	of incorporation)		(Date of duration, if other	than perpetual)
5. To be determine	ď			<u> </u>
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60	ss in Fi)7.1502	orida, if prior to registration), F.S., to determine penalty liabi	ility)
7901 4th St N ST 7	E 300 St. Petersburg FL 33702	. ~		
7901 4th St N ST	(Principa E 300 St. Petersburg FL 33702	office	street address)	Z4FEB
	(Current m	ailing a	ddress, if different)	3-8
8. Name and stree	et address of Florida registered agent:	(P.O. I	Box NOT acceptable)	PH 2
Name:	Northwest Registered Agent LLC			2: 31
Office Address:	7901 4th St N STE 300		_	rn ·
	St. Petersburg		, Florida	
			(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.

(Registered agent's signature)

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.

□ Chairman	James Johnson Name:	□ Chairman	Name:
	6720 Downs Road	□Vice Chairman	6405 Greenfield Drive Address:
	Address: Paducah KY 42003	□Director	Paducah KY 42003
Director			
President		President	
□Vice President			
Secretary	□Treasurer	☑ Secretary	□Treasurer
Other	□Other	Other	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
□ 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
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Use an attachment to report more than six (6). be added to the index when filing your Florida D	enartment of State Annual R	leport form.
12.	Signature of D	irector or Officer	

s.817.155, F.S.

Commonwealth of Kentucky Michael G. Adams, Secretary of State

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 304421

Visit https://web.sos.ky.gov/ftshow/certvalidate.aspx to authenticate this certificate.

I, Michael G. Adams, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

TRACK TECH, INC.

TRACK TECH, INC. is a corporation duly incorporated and existing under KRS Chapter 14A and KRS Chapter 271B, whose date of incorporation is March 11, 1994 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that Articles of Dissolution have not been filed; and that the most recent annual report required by KRS 14A.6-010 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 6th day of February, 2024, in the 232nd year of the Commonwealth.



Michael G. adam

Michael G. Adams Secretary of State Commonwealth of Kentucky 304421/0327663