# F2400000148

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#### **COVER LETTER**

	Division of Corporations					
SUBJECT:	Modea Holdings, Inc.					
Name of corporation - must include suffix						
Dear Sir or M	ladam:					
"Certificate o	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	f Good Standi	ing" and check are subr			
Please return	all correspondence concerning	g this matter to	o the following:			
		Name of Pe	erson			
CT Corporatio	n Systems					
-		Firm/Comp	any			
1200 South Pir	ne Island Road					
		Addres	S			
Plantation, FL	33324					
	(	City/State and	i Zip code			
Ct-stated	communications@	valters to	112/0 C COM			
<u> </u>	Communications@ w E-mail address: (	to be used fo	r future annual report n	otification)		
For further in	formation concerning this mat	tor, please ca	11:			
Morris McCrary		540	400-8118  Daytime Telephone Number			
Name	e of Person	Area Code	Daytime Teleph	none 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 Tallahossee, FL 32314			
	check for the following amounted payable to: FLORIDA DEPing Fee X \$78.75 Filing Certificate of	ARTMENT ( Fee &	DESTATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy		

## i r

#### 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 unavai	able in Florida, enter alternate corporate name a	adopted for the purpose of transacting business in Florida)		
Virginia				
(State or count	ry under the law of which it is incorporated)	(FFI number if applicable)		
2.06.2005				
(Date of incorporation)		5. (Date of duration, if other than perpetual)		
`	1	(sate of addation, it observed than perpetually		
<del>.</del>	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) 02, F.S., to determine penalty liability)		
715 Pratt Drive	Suite 2200, Blacksburg, VA 24060			
		ce street address)		
	(Current mailing	g address, if different)		
		•		
	et address of Florida registered agent: (P.O	Box NOT acceptable)		
vame and stre	CT Corporation Systems			
Name:		<del></del>		
Name:	1200 South Pine Island Road	• •		
Name:	1200 South Pine Island Road	33324		
Name:	1200 South Pine Island Road	, Florida 33324		
Name: ice Address:	Plantation (City)	, Florida 33324(Zip code)		
Name: ce Address: legistered ag	Plantation  (City)  ent's acceptance:			
Name: ice Address: Registered agoing been name	Plantation  (City)  ent's acceptance:  ned as registered agent and to accept service	The state of process for the above stated corporation at the plant as registered agent and agree to act in this capacity.		
Name: ice Address: Registered ag	Plantation  (City)  ent's acceptance:			

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	Bryce Cannon Name:	□ Chairman	Name: Christopher Riegger				
☐ Vice Chairman	Address:	☐ Vice Chairman	Address: 1715 Pratt Drive, Suite 2200				
Director	Blacksburg, VA 24060	Director	Blacksburg, VA 24060				
<b>■</b> President		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer				
□Other	Other	■Other	Other				
□ Chairman □ Vice Chairman ■ Director	Name: Aaron Herrington  Address: 2270 Kraft Drive, Suite 1450  Blacksburg, VA 24060	□Chairman □Vice Chairman □Director	Name:				
President		□President	2074				
□ Vice President		□ Vice President					
☐ Secretary	☐ Treasurer	☐ Secretary	☐ Treasurer $\omega$				
Other	Other	□ Other	Other				
□ Chairman	Name:	Chairman	Other				
☐ Vice Chairman	Address:	☐ Vice Chairman	Address:				
Director		Director					
President		□President					
□ Vice President		□ Vice President					
□Secretary	☐ Treasurer	☐ Secretary	☐ Treasurer				
□Other	Other	Other	Other				
Important Notice: Individuals may be		ent of State Annual R	ed for reporting purposes only. Non-indexed eport form.				
	Signature of Director of	r 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.  Christopher Riegger							
13.	/7						

## Commonwealth of Hirginia



### State Corporation Commission

#### CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That Modea Holdings, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on December 6, 2005;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Scaled at Richmond on this Date:

January 4, 2024

Bernard J. Logan, Clerk of the Commission