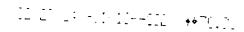
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

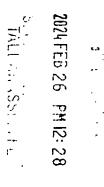


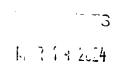
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RECEIVED

FEB 26 2024





COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tet Link Titernational The Name of corporation - must include suffix
Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida." "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following: MICHAEL OUECZON Name of Person Tet Link International
Jet Link International 3550 S. Washington Ave # 4 Titusville FL 32780 City/State and Zip code
Titusville FL 32780
City/State and Zip code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Guerzon at (206) 277 8945 Name of Person Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32303 MAILING ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE. \$70.00 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. Tet Link International Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc." "Co." or "Corp.") Jet link USA (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) July 19 2000 5. Currently open (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) 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.

(Registered agent's signature)

A. DIRECTORS						
□Chairman	Michael Guerzon	` □Chairman	Name:			
□Vice Chairman	Add 4180 Grovewood La	□Vice Chairman	Address:			
□Director	Titusville FL	□Director				
President	32780	□President				
,	-	□Vice President				
□ Secretary	□Treasurer	Secretary		☐ freasurer		
□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		☐ Freasurer		
□Other	□Other	□Other		□Other		
□Chairman	Name:	□ Chairman	Name:			
	Address:	□Vice Chairman	Address:			
□Director		□Director				
— □President		□President				
∐Vice Presidem		□Vice President				
□Sceretary	☐ Treasurer	□ Secretary		☐ Treasurer		
□Other	□Other	□()ther		□Other		
Important Notice: individuals may be	Use an attachment to report more than six (6). The added to the index of the filing your Florida Department	irtinent of State Annual Re	eport 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						
The officer or directly she is aware that fals. 8.817.155, E.S.	alse information submitted in a document to the D	epartment of State constitu	nat the facts state nes a third degre	ed nerein are true and that he or ee felony as provided for in		
13. <u>M</u> 1	Chaef 6 ver zon -					
	cryped or printed name and capacity or	person signing apprication	• •			



The State of Washington

Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

JET LINK INTERNATIONAL, INC.

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 07/19/2000.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 02/22/2024 UBI Number: 602 052 860

to R Hollie



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State

Date Issued: 02/22/2024