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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 365581 4308005				
AUTHORIZATION CONTROL OF THE PARTY OF THE PA				
COST LIMIT (. \$70.				
ORDER DATE: March 14, 2024				
ORDER TIME : 2:0 PM				
ORDER NO. : 365581-005				
CUSTOMER NO: 4308005				
FOREIGN FILINGS				
NAME: OFF DUTY OFFICERS INC.				
XXXX QUALIFICATION (TYPE: CO)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Shauna Godbolt EXT#				

EXAMINER:

## **COVER LETTER**

TO:		tration Se ion of Co	ection rporations					
SUBJ	FCT.	Off Duty	Officers Inc.					
50130			Name	of corporation	- mus	t include suffix	· · · · · ·	
Dear S	ir or M	adam:						
"Certif	icate o	f Existenc		te of Good Stan	ding"	and check are sub	ct Business in Flo mitted to register	
Please	return :	all corresp	oondence concer	ning this matter	to the	following:		
Dawn l	Hall, Pa	ralegal						
				Name of	Person		·	
Troutn	ian Pepp	oer Hamilt	on Sanders LLP					
				Firm/Com	pany			
400 Be	rwyn Pa	ark						
				Addr	ess			
Berwyi	n, PA 19	9312						
				City/State a	nd Zip	code		
statelic	ensing@	protos.co						
			E-mail addre	ss: (to be used t	or futu	re annual report r	iotification)	
For fur	ther in	ormation	concerning this	matter, please o	all:			
Dawn I	Hall			610 at (	640	)-5435		
-	Name	e of Perso	n	at ( Area Cod	/	Daytime Telep	hone 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					
	nake ch	eck payabl	the following an le to: FLORIDA I \$78.75 Fili Certificate	DEPARTMENT ing Fee &	\$78.7	FATE 75 Filing Fee & fied Copy	\$87.50 Filion Certificate Certified C	of Status &

## 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.

	corporation: must include "INCORPORATE Corp." "Inc." "Co." or "Corp.")	ED." "COMPANY." "CORPORATION."			
(If name unavail	lable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business	in Florida	a)	
2. California		3			
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)		_	
4. 10/14/1993		33-0581831			
(Date	e of incorporation)	(Date of duration, if other than perpetu	(Date of duration, if other than perpetual)		
6. 1/31/2024					
··		ss in Florida, if prior to registration) 7.1502, F.S., to determine penalty liability)		_	
7 383 Main Avenu	e, Suite 505, Norwalk, CT 06851				
, . <u> </u>		office street address)		_	
	(Current ma	ailing address, if different)	20:	_	
			2024 Kiar		
8. Name and stre	et address of Florida registered agent: (	P.O. Box NOT acceptable)	È	****	
Name:	Corporation Service Company		<u></u>	7-2	
	1201 Hays Street		AH	(-,12)	
Office Address:	1201 Hays Succe		ض	•	
	Tallahassee	Florida <u>32301</u> (Zip code)	28		
	(City)	(Zip code)			
O Dogistored ag	ent's acceptance:				
		ervice of process for the above stated corporati	ion at th	e place	
designated in this	s application, I hereby accept the appoi	intment as registered agent and agree to act in	this cap	pacity. I	
	omply with the provisions of all statute r with and accept the obligations of my	es relative to the proper and complete perform position as registered opent	ance of	my dutie	
	with and accept the vongations by my	production as regimered agents			
_	Shauna Godboe (Registered agent	<u>t</u>			
	(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.

## DocuSign Erivelope IDi B3129FD2-78B8-4B92-A940-803254121EA3

□ Director  ■ President	Name:  Mark Hjelle  383 Main Avenue, Suite 505  Address:  Norwalk, CT 06851	☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President ☐Secretary	Name:  Anthony Escamilla  383 Main Avenue. Suite 505  Address:  Norwalk, CT 06851	
□Other	Other	□Other	Other CFO	
☐Director ☐President	Name:	☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President ☐Secretary ☐Other	Name:	
□Chairman □Vice Chairman □Director □President □Vice President □Secretary	Name:Address:	□Chairman □Vice Chairman □Director □President □Vice President □Secretary	Name:Address:	
•		·		
□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.

Mark Hjelle, President



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: OFF DUTY OFFICERS INC

**Entity No.:** 1844774 **Registration Date:** 10/14/1993

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of March 15, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 191436429

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.