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Division of Corporations

Florida Department of State Division of Corporation

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(((H24000113806 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JAMES A. SCHMIDT, P.A.

Account Number : I20120000088 : (813)250-3700 Phone Fax Number : (813)250-3701

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

Mclone Law, Corporation

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COVER LETTER

	gistration Section vision of Corporat	ions			
SUBJEC	T. MELONE LAV	V. CORPORATION			
SOBJEC	L	Name of corporati	ion - mus	st include suffix	
Dear Sir or	Madam:				
"Certificat	e of Existence." or	y Foreign Corporation f "Certificate of Good So poration to transact busi	tanding''	and check are sub-	
Please retu	rr. all corresponde	nce concerning this mat	ter to the	following:	
JAMES A.	SCHMIDT, ESQ.				
		Name	of Persor	1	
JAMES A.	SCHMIDT, P.A.				
		Firm/C	ompany		····
2904 W BA	Y TO BAY BLVD.				
-		Ad	dress		
TAMPA, F	L 33629				
		City/State	and Zip	code	
JAS@SCH	MIDTLAWOFFICE				
	E-	mail address: (to be use	d for fut	ure annual report n	otification)
For further	information conce	erning this matter, pleas	e call:		
JAMES SC	нмірт	813	, 25	0-3700 Daytime Telepl	
N.	ame of Person	Area C	ode	Daytime Telepl	none Number
Re Di Th 24	REET/COURIE gistration Section vision of Corporat e Centre of Tallah 15 N. Monroe Stre llahassee, FL 323	ions assec et, Suite 810		MAILING AI Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations
Enclosed in Please make \$70.00		ollowing amount: FLORIDA DEPARTME S78.75 Filing Fee & Certificate of Status	□ 578.	TATE 75 Filing Fee & iified Copy	 \$87.50 Filing Fee, Certificate of Status & Certified Copy

(((H240001138063)))

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.

	V. P.C. Corporation.		
(Enter name of o "inc.," "Co.," "C	corporation; must include "INCORPORATED," 'orp," "Inc," "Co." or "Corp,")	"COMPANY," "CORPORATIO	N,"
MELONE LA	W, CORPORATION		
(If name unavail	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacti	ng business in Florida)
VIRGINIA	1		
(State or count	y under the law of which it is incorporated)	(FEI number, if a	pplicable)
JULY 28, 2014			
(Date of incorporation)		(Date of duration, if other than perpetual)	
12110 SUNSET	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150. HILLS ROAD STE. 600, RESTON, VA 20190 (Principal office	2, F.S., to determine penalty liabil	
	·	address, it different)	2024 APR
Name and stre	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	1
Name:	JAMES A. SCHMIDT, P.A.	·	ېې ₽
Office Address:	2904 W. BAY TO BAY BLVD.		PH 12:
	TAMPA	. Florida 33629	ြို့ ယ
	(City)	(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.

(Registerey 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.

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]

(((H24000113806 3)))

A. DIRECTORS				
□Chairman	Nune. REBECCA MELONE.	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
■ Director	STE. 608	Director		
■ President	RESTON, VA 20190	□President		
□Vice President		□Vice President		
□ Secretary	☐ Treasurer	☐ Secretary	Treasurer	
□Other		□Other	DOther	
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	<u> </u>	□ Director		
□President		President		
□Vice President		□Vice President		
Secretary	Treasurer	□ Scoretary	LiTroasurer	
□ Other	Other	□Other	□Other	
□ Chairman	Nanic:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		Ci Director		
President		□l¹resident		
□ Vice President		□Vice President	··	
□ Secretary	Treasurer	□ Secretary	□ Freasurer	
□ Other	CJUther	□Other		
Important Notice: individuals may be	Use an attachment to report more than six (6). The attac added to the index when filing your Florida Departmen	it of State Annual Re	ed for reporting purposes only. Non-indexed eport form.	
· = (Signature of Director or	Officer		
The officer or direct she is aware that for 8.817.155, F.S.	ctor signing this document (and who is listed in number dse information submitted in a document to the Departm	11 above) afterns th	out the facts stated herein are true and that he or ates a third degree felony as provided for in	

13. REBECCA MELONE

(Typed or printed name and capacity of person signing application)

(((H24000113806 3)))

Commondoealth of Hirginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

1 Certify the Following from the Records of the Commission:

That Melone Law, P.C. is duly incorporated under the law of the Commonwealth of Virginia:

That the corporation was incorporated on July 28, 2014;

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 Sealed at Richmond on this Date:

March 15, 2024

Bernard J. Logan, Clerk of the Commission