## F24000003275

(Req	uestor's Name)	
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Certified Copies	Certificates	s of Status
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## **COVER LETTER**

_	tration Section ion of Corporations				
SUBJECT:	IEC Corporation				
	Name of	corporation	- must include suffix		
Dear Sir or M	adam:				
"Certificate o	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	FGood Stand	ding" and check are subn		
Please return	all correspondence concerning	this matter	to the following:		
Diana Lotfi					
		Name of I	Person		
IEC Corporation	ne				
B 118		Firm/Com	pany		
16485 Laguna	Canyon Road, Suite 300				
	<u></u> -	Addre	SS		
Irvine, CA 926	517				
	(	City/State ar	nd Zip code		
LottiD@iecco	lleges.com				
	E-mail address: (	to be used f	or future annual report no	etification)	
For further in	formation concerning this mat	ter, please ca	all:		
Diana Lotfi	21	949	272-7254	272-7254	
Nam	e of Person	Area Code	Daytime Telepho	one Number	
Regis Divis The C 2415	EET/COURIER ADDRESS: tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303		MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	
	check for the following amountek payable to: FLORIDA DEPing Fee S78.75 Filing I Certificate of S	ARTMENT Fee & 🗆	OF STATE \$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy	

## 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 unavail	able in Florida, enter alternate corporate name ac	dopted for the purpose of transacting business in Florida	)
2. Delaware	j,	3. <u>33-0807482</u>	
(State or countr 02/05/2010	y under the law of which it is incorporated)  5.	(FEI number, if applicable)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
6			
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		_
716485 Laguna Ca	anyon Road. Suite 300. Irvine, CA 92618		
	(Principal office	e street address)	_
			-요
	(Current mailing	address, if different)	181.A 038
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Corporation Service Company		1860 H
Office Address:	1201 Hays Street	— PH 4: 57	STAT
	Tallahassee	Florida 32301	SHO
	(City)	(Zip code)	
	ent's acceptance: and as registered agent and to accept service	e of process for the above stated corporation at the ent as registered agent and agree to act in this cap	2 place

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 Shoukry Tiab Shoukry Tiab □ Chairman Name: □ Chairman 16485 Laguna Canvon Road 16485 Laguna Canyon Road Address: □ Vice Chairman □Vice Chairman Address: Suite 300 Suite 300 ■ Director □Director Irvine, CA Irvine, CA □President President 92618 92618 □ Vice President □Vice President □ Secretary □Treasurer □Secretary □Treasurer Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_ □Other \_\_\_\_\_ Aaron Mortensen Name: Joanna Gut-Vargas □ Chairman Name: □Chairman 16485 Laguna Canyon Road 16485 Laguna Canyon Road □Vice Chairman Address: □Vice Chairman Address: Suite 300 Suite 300 □Director □ Director Irvine, CA Irvine, CA □President □President 92618 92618 □Vice President □Vice President □ Secretary ■ Treasurer ■ Secretary □Treasurer 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 \_\_\_ Important Notice: Use an attackment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may 60 added to the index when filing your Florida Department of State Annual Report 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 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.





I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "IEC CORPORATION" IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MAY, A.D. 2024.



Authentication: 203549815

Date: 05-23-24