# F24000003498

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





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### COVER LETTER

TO: Registration Section Division of Corporation	ons			
SUBJECT: BidMyCommuni	ty Inc.			
	Name of corporation	on - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by "Certificate of Existence," or " above referenced foreign corporate to the corporate of the corp	Certificate of Good Sta	anding" and check are sul	act Business in Florida," bmitted to register the	
Please return all correspondence	ce concerning this matt	er to the following:		
Max Kiejdan				
	Name o	f Person	<del></del>	
BidMyCommunity, Inc				
<del></del>	Firm/Co	mpany		
6181 NW 23rd Road				
	Add	Iress		
Boca Raton, FL 33434				
	City/State	and Zip code		
max@bidmycommunity.com				
E-m	ail address: (to be used	for future annual report	notification)	
For further information concern	ning this matter, please	call:		
Max Kiejdan	at () 338.9306			
Name of Person	Area Co	de 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		Registration S Division of C P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	ORIDA DEPARTMEN	T OF STATE  ☐ \$78.75 Filing Fee & Certified Copy	S87.50 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.

L. BidMyCommu	nity Inc.		
(Enter name of "Inc.," "Co" "C	corporation: must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavai	lable in Florida, enter alternate corporate name a	adopted for the purpose of transacting busing	ness in Florida)
		99-3194269	
	ry under the law of which it is incorporated)	(FEI number, if applicable	
(Date of incorporation)		(Date of duration, if other than perpetual)	
7. 6181 NW 23rd R	toad, Boca Raton, FL 33434	02. F.S., to determine penalty liability) re <u>street</u> address)	
	(Current mailing	g address, if different)	
Name:	et address of Florida registered agent: (P.O  Max Kiejdan  6181 NW 23rd Rd	Box NOT acceptable)	รัชร <sub>ั</sub> ส มีปีสี 28
Office Address:	Boca Raton	33434	PH
	(City)	. Florida Zip code)	5: 24

#### 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.

Chairman	Name: Max Kiejdan	□Chairman	Grant Kneble Nume:
□Vice Chairman	Address: 6181 NW 23rd Rd	□Vice Chairman	Address: 6181 NW 23rd Rd
Director	Boca Raton, FL 33434		Boca Raton, FL 33434
□President		□President	
□Vice President		□Vice President	
<b>■</b> Secretary	Treasurer	☐ Secretary	□Treasurer
☐Other	Other	□()ther	
□Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:		Address:
□Director		Director	
□President		□President	
□Vice President	<del></del>	□Vice President	
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	□Other
□Chairman	Name:	□Chairman :	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□Presidem _	
□Vice President		□Vice President	
☐Secretary	□Treasurer	□Secretary	□Treasurer
□Other	□Other	□Other	Other

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.

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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BIDMYCOMMUNITY INC." 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 TENTH DAY OF JUNE, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BIDMYCOMMUNITY INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF MAY, A.D. 2024.



Jeffrey W. Bullicca, Secretary of State

Authentication: 203665234