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(Re	questor's Name)	
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☐ PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ie)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer	
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COVER LETTER

TO:	Registration Sec Division of Corp						
SUBJ	ECT: The	Wenderoff Lav	w Group, Af	Corp.			
			of corporation		nclude suffix		
Dear S	ir or Madam:						
"Certif	closed "Applicati icate of Existence referenced foreign	," or "Certificate	of Good Star	nding" an	d check are sub		
Please	return all correspo	ondence concern	ing this matte	r to the fo	ollowing:		
		Lori	Venderoff				
			Name of	Person			
		The	Wenderoff	Law Gr	oup Corp		
		1110	Firm/Con		одр, оогр.		
		0400					
		21820	Burbank E Addr		ite 305		
			Auu	CSS			
		\	<u> Voodland H</u>				
			City/State a	and Zip co	ode		
		del	bra@wende	erofflaw.	com		
		E-mail addres	s: (to be used	for future	annual report i	notific	ation)
For fur	ther information of	concerning this n	natter, please	call:			
<u>D</u>	ebra L. Doby		at (<u>818</u>		1.1413		
	Name of Persor	1	Area Coo	ie	Daytime Telep	hone i	Number
	Registration Sec Division of Corp The Centre of T	oorations allahassee Street, Suite 81	JUL 29		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orpora 7	n ations
Please	ed is a check for t make check payable .00 Filing Fee		EPARTMENT ig Fee & [of Status	□ \$78.75 Certifi	TE Filing Fee & ed 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.

1. The Wend	eroff Law Group APCorp. reporation; must include "INCORPORATED,"	COMPANY " "COPPORATIO	N "		-
"Inc.," "Co.," "Co	rp," "Inc," "Co," or "Corp.")	COMPANT, CORPORATIO	14,		
(If name unavaila	ble in Florida, enter alternate corporate name ad	opted for the purpose of transaction	ng business	in Florida)	-
2. California	3	47-4621813			_
(State or country	y under the law of which it is incorporated)	(FEI number, if a	pplicable)		
4. <u>07/14/2</u>	015 5			_	_
(Date	of incorporation)	5. (Date of duration, if other than perpetual)			
6. <u>04/06/2</u>					-
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		ity)		
7. <u>515 No</u>	orth Flagler, Suite 350, West Palm B				_
	(Principal office	street address)			
21820	Burbank Blvd. Suite 305 Woodland				
	(Current mailing	address, if different)			
8. Name and street	t address of Florida registered agent: (P.O.	Box NOT acceptable)			
Name:	Elizabeth Yohe		3	-3	()
				3	
Office Address:	515 North Flagler Suite 350	<u> </u>			•:
	West Palm Beach			် ငာ	
	(City)	(Zip code)		•	٠
9. Registered age	nt's accentance			**	
	nt's acceptance. ed as registered agent and to accept service	of process for the above state	d corpora	tion at the	pläče
designated in this	application, I hereby accept the appointme	nt as registered agent and agr	ree to act ii	n this capa	city. I
	omply with the provisions of all statutes rela with and accept the obligations of my posit		ete përforn	nance of m	y duties,
una I um jumiliur	with the accept the vongations of my posit	ion us registereu ugent.			
	59				
	(Registered agent's sign	ature)			
10 Attached is a c	ertificate of existence duly authenticated, no	ot more than 90 days prior to d	lelivery of	this applies	ation to

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS

□Chairman	Name: Lori Wenderoff	□ Chairman	Name:	
□Vice Chairman	Address: 9221 Corbin Ave #110	□Vice Chairman	Address:	
Director	Northridge, CA 91324	□Director		
⊠ President		□President		
□Vice President		□Vice President		
Secretary	Treasurer	☐ Secretary	□Tre	asurer
□Other	Other	□Other	D0th	ner
□ Chairman	Name: Lori Wenderoff	□Chairman	Name:	
□Vice Chairman	Address: 9221 Corbin Ave #110	□Vice Chairman	Address:	
□Director	Northridge, CA 91324	□Director		
□President		□President		
□Vice President		□Vice President		
⊠Secretary	□Treasurer	Secretary	□Тте	easurer
□Other	Other	Other	Dot	ner
□Chairman	Name: Lori Wenderoff	□Chairman	Name:	
□Vice Chairman	Address: 9221 Corbin Ave #110	□Vice Chairman	Address:	
□Director	Northridge, CA 91324	□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	⊠ Treasurer	☐ Secretary	□Tre	asurer
□Other	Other	Other	Oth	ner
Important Notice: individuals may be	Use an attachment to report more than six (6). The added to the index when filing your plorida per	indermant & Chata Annual De	most form	
	ctor signing this document (and who is listed in n alse information submitted in a document to the E			
13	3	f nerson cirmina annication	<u> </u>	
Important Notice: individuals may be 12. The officer or dire she is aware that fa s.817.155, F.S.	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep Signature of Director signing this document (and who is listed in nalse information submitted in a document to the D	ne attachment will be image partment of State Annual Ro Justor or Officer number 11 above) affirms the Department of State constitu	d for reporting purposes eport form. at the facts stated herein stes a third degree felony	only. Non-inde



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

Entity Name: THE WENDEROFF LAW GROUP, APC

Entity No.: 3806967 **Registration Date:** 07/14/2015

Entity Type: Stock Corporation - CA - Professional

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 May 01, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 205860929

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.