F24000004629

	(Requestor's Name)						
	(Address)						
	(Address)						
	(City/State/Zip/Phone #)						
	(Only Old Collaps Hone sy						
	PICK-UP WAIT MAIL						
_	(Business Entity Name)						
	, ,						
	(Document Number)						
Cer	tified Copies Certificates of Status						
Sı	pecial Instructions to Filing Officer:						
	Special instructions to rining Officer.						
	1/2/2/1967						
	WAU-106428						

Office Use Only



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07/19/24--01021--001 **78.75

SECRETARY OF STATE OF STATE OF CORPORATIONS



July 23, 2024

JONATHAN DAVIS 2093 PHILADELPHIA PIKE #5334 CLAYMONT, DE 19703 US

SUBJECT: ARRAY CORPORATION

Ref. Number: W24000106428

We have received your document for ARRAY CORPORATION and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones Regulatory Specialist II

Letter Number: 924A00016144

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Array Corporation			
SUBJECT:	Name of corporation - m	ust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Fore "Certificate of Existence," or "Cert above referenced foreign corporation."	ificate of Good Standing	g" and check are sub	
Please return all correspondence co	encerning this matter to t	he following:	
Jonathan Davis			
	Name of Pers	son	
Array Corporation			
	Firm/Compan	у	
2093 PHILADELPHIA PIKE #5334			
	Address		· ·
Claymont, DE 19703			
	City/State and 7	Lip code	
statedocs@arraycorp.com			
E-mail a	iddress: (to be used for f	uture annual report i	notification)
For further information concerning	this matter, please call:		
Jonathan Davis	at (404)	550-4586	
Name of Person	Area Code	Daytime Telep	hone Number
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
Enclosed is a check for the following Please make check payable to: FLORI STORE \$70.00 Filing Fee \$78.7	IDA DEPARTMENT OF	STATE 8.75 Filing Fee &	□ \$87.50 Filing Fee,
Certi	_	ertified Copy	Certificate of Status a 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.

Array Corporation	on		
	orporation; must include "INCORPORATED, orp." "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
Florida Array C	Corporation		
(If name unavails	ible in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
Delaware	3.	85-1708368	
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)	
7/1/2021	5		
(Date	of incorporation)	(Date of duration, if other than perpetual)	
)		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
, 7711 Center Ave	Suite 670 Huntington Beach CA 92647-3039		
·	(Principal offi	ice <u>street</u> address)	SEALINIE
2093 Philadelph	ia Pike #5334, Claymont, DE 19703		1 99
	(Current mailin	ng address, if different)	人種
		•	ω
 Name and <u>stree</u> 	<u>et address</u> of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	英兽
Name:	Corporation Service Company		14.05.8 m 3: 57
Office Address:	1201 Hays Street		; المب
	Tallahassee	, Florida 32301	
	(City)	(Zip code)	
Having been nam lesignated in this further agree to co	application, I hereby accept the appointm	ice of process for the above stated corporation at the penent as registered agent and agree to act in this capacitative to the proper and complete performance of myssition as registered agent.	city. I
_	Allison Vu	ey	
		-	•
he Department of		not more than 90 days prior to delivery of this applica flicial having custody of corporate records in the jurisc	

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

A. DIRECTORS			
 Chairman -	Fouad ElNagger Name:	□Chairman	Name:
 	Address: 2093 Philadelphia Pike #5334	□Vice Chairman	Address: 2093 Philadelphia Pike #5334
Director	Claymont, DE 19703	□Director	Claymont, DE 19703
President		□President	
 □Vice President		■ Vice President	
Secretary	□Treasurer	□ Secretary	□Treasurer
 Other	□Other	□Other	□Other
☐Chairman	Name: Andrew Rankin	□Chairman	Name:
 ∰Vice Chairman 	Address: 2093 Philadelphia Pike #5334	□Vice Chairman	Address:
 ☑Director	Claymont, DE 19703	□Director	
 President 		□President	
 □Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
 Other	□()ther	□Cither	Other
☐Chairman	Name:	□Chairman	Name:
 □Vice Chairman	Address:	□Vice Chairman	Address:
 Director		□Director	
 □President		□President	
 □Vice President		□Vice President	
 Secretary	□Treasurer	☐ Secretary	☐ Freasurer
 	Other	□Other	□ Other
	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep		
j	Signature of Dire	ctor or Officer	
The officer or dire she is aware that fi s.817.155, F.S.	ector signing this document (and who is listed in nualse information submitted in a document to the D	umber 11 above) affirms th Department of State constitu	nat the facts stated herein are true and that he of ites a third degree felony as provided for in
3. Jonathan Da	vis, Vice President		
i	(Typed or printed name and capacity of	person signing application	1}

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ARRAY 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 SECOND DAY OF JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARRAY

CORPORATION" WAS INCORPORATED ON THE FIRST DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

5969150 8300 SR# 20243054056 Authentication: 203851951

Date: 07-02-24