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(Re	equestor's Name)	
(À:	ddress)	
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(Ci	ty/State/Zip/Phone	
	WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer.	

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COVER LETTER

TO:		ation Section n of Corporations			
SUBJ	rct.	TURNGATE, INC.			
SUBJ	ECI: _		corporation -	must include suffix	
Dear S	Sir or Mac	dam:			
"Certif	ficate of I	Existence," or "Certificate of	Good Standi	ng" and check are subm	
Please	return al	l correspondence concerning	this matter to	the following:	
Bruce	e Potter				
			reign Corporation - must include suffix reign Corporation for Authorization to Transact Business in Florida," ritificate of Good Standing" and check are submitted to register the ion to transact business in Florida. roncerning this matter to the following: Name of Person		
TURI	NGATE	, INC.			
			Firm/Compa	ıny	· · · ·
3582	Church	n Rd			
			Address		
Ellico	ott City I	MD 21043			
		(City/State and	Zip code	
taxop	os+turno	gate@kruzeconsulting.c	om		
		E-mail address: (to be used for	future annual report no	tification)
For fur	rther info	rmation concerning this mat	ter, please cal	:	
Lucia	a Gonza	llez Armesto	, 209	783-8726	
	Name	of Person	\	Daytime Telepho	one Number
	Registr Divisio The Ce 2415 N	ET/COURIER ADDRESS: ation Section in of Corporations intre of Tallahassee . Monroe Street, Suite 810 issee, FL 32303		Registration Sec Division of Cor P.O. Box 6327	ction porations
Please		g Fee 🔲 \$78.75 Filing l	ARTMENT OF \Box	578.75 Filing Fee &	-

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 unavaila	ble in Florida, enter alternate corporate name ad	•	ting business in Florida)
Delaware	3. 	92-3103498	
(State or countr 03/20/2023	y under the law of which it is incorporated) 5.	(FEI number, if	••
(Date 05/31/2023	of incorporation)	(Date of duration, if other	er than perpetual)
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)		oility)
3582 Church	Rd, Ellicott City MD 21043		
	(Principal office	street address)	
	t address of Florida registered agent: (P.O. Northwest Registered Agent LLC	address, if different) Box NOT acceptable)	29
Name:	7901 4th St N STE 300	_	2974 SEP
		33702	÷ 5.
	St. Petersburg	Fiorida	<u>.</u>
ffice Address:	St. Petersburg (City)	, Florida 33702 (Zip code)	-5

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.

(Registered agent's signature)

A. DIRECTORS Bruce Potter □Chairman □Chairman Name: 3582 Church Rd, Ellicott City Address. _ □ Vice Chairman Address: □ Vice Chairman MD 21043 □Director □Director □President ☐ Vice President □ Vice President □Treasurer □ Secretary □Treasurer □ Secretary □Other _____ □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 _____ ☐Other _____ □ Chairman Name: □ Chairman Name: □Vice Chairman Address: □Vice Chairman Address: _____ □Director □Director □President □President □Vice President ___ □Vice President □ Secretary □Treasurer ☐ Treasurer □ Secretary □Other _____ □Other _____ □Other _ □Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when illing 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.

Bruce Potter, CEO



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

DELAWARE, DO HEREBY CERTIFY "TURNGATE 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 TWENTY-FIRST DAY OF AUGUST, 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 "TURNGATE INC."

WAS INCORPORATED ON THE TWENTIETH DAY OF MARCH, A.D. 2023.

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

Authentication: 204213540

Date: 08-21-24

7360702 8300 SR# 20243477496