FAUMOUSA &

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

Office Use Only



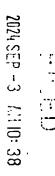
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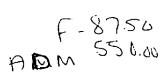
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SEP 1 3 2024



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Commercial Lighting Indus	tries, Inc.		
	of corporation - n	nust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificat above referenced foreign corporation to	e of Good Standin	g" and check are submitte	
Please return all correspondence concern	ning this matter to	the following:	
Wendy Hertz			
	Name of Per	son	
Commercial Lighting Industries, Inc.			
	Firm/Compar	у	
81161 Indio Blvd			
	Address		
Indio, CA 92201			
	City/State and 2	Zip code	
wendy@commercial-lighting.net			
E-mail addres	ss: (to be used for t	uture annual report notifi	cation)
For further information concerning this	matter, please call:		
Wendy Hertz	at (<u>818</u>)	(818) 445-6411	
Name of Person	Area Code	Daytime Telephone	Number
STREET/COURIER ADDRE Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303		MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	n ations
Enclosed is a check for the following an Please make check payable to: FLORIDA I S70.00 Filing Fee S78.75 Fili Certificate	DEPARTMENT OF ng Fee & 🔠 \$7		\$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 ad	opted for the purpose of transacting business in Flor	
California	3. ^{3.}	(FEI number, if applicable)	
(State or countr	$\frac{3. \frac{3.}{2}}{\text{y under the law of which it is incorporated}}$	(FEI number, if applicable)	
10-26-1999	5.	<u> </u>	
(Date of incorporation) 5.		(Date of duration, if other than perpetual)	
October 1, 2022			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	lorida, if prior to registration) 2, F.S., to determine penalty liability)	
81161 Indio Blvd	, Indio CA 92201	<i>y.</i> 2 1	
	(Principal office	street address) 24 SEP	
	(Current mailing	address, if different)	
. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	URS AGENTS, LLC	Box NOT acceptable)	
ffice Address:	3458 LAKESHORE DRIVE	-	
	TALLAHASSEE, FL	Florida 32312	
	(City)	(Zip code)	

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 Wendy Hertz-Polakov Name: Frank Halcovich Chairman Chairman □ Chairman 80221 Via Pessaro 80221 Via Pessaro Address: ■ Vice Chairman ☐ Vice Chairman Address: La Quinta, CA 92253 La Quinta CA 92253 **■** Director Director President ☐ President ■ Vice President ☐ Vice President Secretary ☐ Treasurer ☐ Secretary ☐Treasurer ■Other _ □Other _____ □Other _____ □Other ______ Name: _____ □ Chairman 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 ☐ Secretary ☐Treasurer 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 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.

(Typed or printed name and capacity of person signing application)



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

Entity Name:

COMMERCIAL LIGHTING INDUSTRIES, INC.

Entity No.: Registration Date:

2180142 10/26/1999

Entity Type:

Stock Corporation - CA - General

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 WHERE OF, I execute this certificate and affix the Great Seal of the State of California this day of July 8, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 198265635

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.