F24000004947

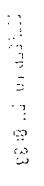
(Requestor's Name)
(Address)
(A)
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Business Etting (Vallie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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000435543510

09/11/24--01014--003 **70.00





COVER LETTER

TO:	_	tration Section ion of Corporations			
SUBJ	ECT:	WINGWORK, INC.			
0020		Name o	f corporation	ı - must include suffix	
Dear S	ir or M	adam:			
"Certif	icate of	"Application by Foreign Corf Existence," or "Certificate of the Coreign corporation to transfer to the Corporation to the Corpo	of Good Star	iding" and check are subr	
Please	return	all correspondence concernir	g this matte	r to the following:	
Matt Ca	astellini				
			Name of	Person	
WINGW	VORK, I	NC.			
			Firm/Con	npany	
114 NW	/ 25th S	t, 1st Floor			
			Addr	ess	
Miami, I	Florida :	33127			
			City/State a	nd Zip code	
taxops+	-wingwo	rk@kruzeconsulting.com			
		E-mail address:	(to be used	for future annual report no	otification)
For furt	ther inf	formation concerning this ma	itter, please (call:	
Lucia G	cia Gonzalez Armesto 209		783-8726		
	Name	e of Person	Area Cod	e Daytime Teleph	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			:	MAILING AL Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction rporations
	nake che	check for the following amount of the payable to: FLORIDA DE ng Fee	PARTMENT Fee &	OF STATE S78.75 Filing Fee & Certified 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.

WINGWORK, IN	IC,		
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	." "COMPANY." "CORPORATION."	
(If name unavail	able in Florida, enter alternate corporate name		
Delaware	3	92-1247998 (FEI number, if applied)	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applie	cable)
11-21-2022	5		
(Date	of incorporation)	(Date of duration, if other than	n perpetual)
January 1, 2024			
Sandary 1, 2024		in Florida, if prior to registration) 502, F.S., to determine penalty liability)	
3120 139th Aveni	ue Southeast, Suite 500. Bellevue,WA 98005		
_		fice street address)	
114 NW 25th St.	1st Floor, Miami, Florida 33127		
	(Current maili	ng address, if different)	
Name and stree	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	
Name:	Northwest Registered Agent LLC		
ffice Address:	7901 4th St N STE 300		
	St. Petersburg	Florida 33702	
	(City)	, Florida 33702 (Zip code)	29 29
D			2024 5
	ent's acceptance: ed as registered agent and to accept serv	ice of process for the above stated co	77
esignated in this	application, I hereby accept the appoint	ment as registered agent and agree t	to act in this capacity.
	omply with the provisions of all statutes		performance of my di
ia i am Jamiliai	with and accept the obligations of my po-	ostiion as registerea agent.	
	~ 1 <i>1</i>		€.
,	Top- Nam		23

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.



Page 1

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

DELAWARE, DO HEREBY CERTIFY "WINGWORK, 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 SEVENTH DAY OF JUNE, A.D. 2024.



Authentication: 203663312

Date: 06-07-24

7148623 8300 SR# 20242808494