F24000005898

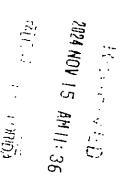
(Requestor's Name)					
(Address)					
(Ac	dress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Bu	rsiness Entity Nar	me)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				

Office Use Only



500439052365

2024 ROV 16 112: 2 5004 3 905 2 3 65 11/15/24--01002--020 **87.50



COVER LETTER

TO:	Registration Se Division of Co						
CLIDA	Rebrand C	ities Project InC					
SUBJ	EC1:	Name of Corporation	on – must in	clude suffix			
Dear S	ir or Madam:						
Affairs	s in Florida", "Ce	ion by Foreign Not for Profit rtificate of Existence", or "Cenced not for profit corporation."	ertificate of	Status" and ch	eck are submitted to		
Please	return all corresp	ondence concerning this ma	tter to the fo	llowing:			
	Hajj Fle	mings					
		Name o	f Person		<u> </u>		
	Rebrand	Cities Project					
		Fim/C	ompany				
	33717 V	33717 Woodward Avenue #202					
		Ado	dress	** ·			
	Birming	ham, MI 48009					
		City/State a	nd Zip Code	:			
	hajj⁄ <u>ā</u> ,ret	prand.city					
	E-n	nail address: (to be used for f	future annua	l report notific	ation)		
For fur	ther information	concerning this matter, pleas	se call:				
Најј Р	Flemings	at (313	215-3513			
	Name o		Area Code	Daytime Te	lephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ection orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Please i		the following amount: e to: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	□\$78.75 F	TE filing Fee & fed Copy	■\$87.50 Filing Fee. Certificate of Status & Certified Copy		

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

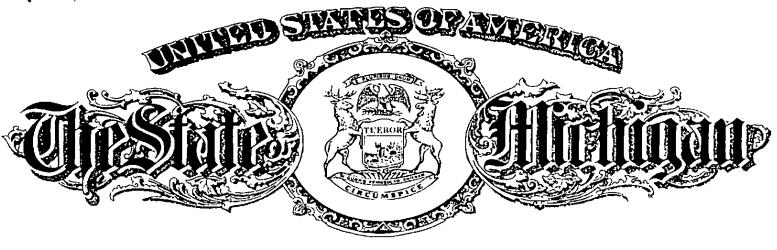
A Charles and		ss in Florida)	
Michigan	ntry under the law of which it is incorporated) (FEI number, if applicable)		
	try under the law of which it is incorporated) [FEI number, if applicable) 23. (Date of duration, if other than per		
(Date of Incorporation) (Date of duration, if other than per			
Technology a	nd personal development training. Leted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine		
(Date first cond	icted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determin	e penalty liability.	
33717 Woodw	ard Avenue #202		
	(Principal office street address)		
n/a			
	(Current mailing address, if different)		
We are curren	ly providing technology training services in the state of Miami.		
(Purpose(s) of	ly providing technology training services in the state of Miami. corporation authorized in home state or country to be carried out in the state of Florida)	2	
		 -	
Manage and ass	and deep of Florida annistand annut (P.O. Day NOT assemble)	7.2	
Name and str	eet address of Florida registered agent: (P.O. Box NOT acceptable)	0.85	
		ZDZ4 KOV TI	
Name:	Hajj Flemings	9	
Name:	Hajj Flemings	9	
Name:			

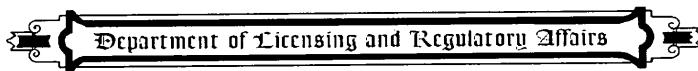
11. Attached is a certificate of exprence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

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

A. DIRECTOR			a	
□Chairman	Name: Hajj Flemings	□Chairman	Name: Sherwyn Davis	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	Birmingham, MI 48009	□Director	Detroit, MI 48208	
■President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	■ Secretary	□Treasurer	
□Other:	Other:	□Other:	□Other:	
□Chairman	Cynthia Respert	□Chairman	Dr. John Maeda	
□Vice Chairman	Address:	□Vice Chairman	Address: 4516 159th Ave NE	
□Director	Cypress, TX 77433	□Director	Redmond, WA 98052	
□President		□President		
□Vice President		□Vice President		
■ Secretary	□Treasurer	Secretary	□Treasurer	
□Other:	Other:	Board M ≣Other:	ember	
□Chairman	Vincent Hunt Name:	□Chairman	Name: Michael Respert	
	Address: 80 Country Way	□Vice Chairman	Address: 18522 Partners Voice Drive	
□Director	Crawfordville, FL 32327	□Director	Cypress, TX 77433	
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer	
■Other: Board M	fember Other:	Board M	ember	
Non-indexed indiv	A Notice: Use an attachment to report more than so viduals may be added to the index when alling you (Signature of Chairman, Vice Chairman or any cases	ir Elorida Department o	of State Annual Report form.	
14. <u>Hajj Fielding</u>	(Typed or printed prine and capacity of a	ocrson signing applicati	(on)	





Lansing, Michigan

This is to Certify That

THE REBRAND CITIES PROJECT

was validly Incorporated on February 1, 2019 as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1982 PA 162 to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 24110252104

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 14th day of November, 2024.

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.