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To:

Division of Corporations

To: 18506176383

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I2009000081 Phone : (307)200-2803 Fax Number : (813)436-5206

**Enter the email address for this business entity to be used for future pannual report mailings. Enter only one email address please

.Email Address:____

FOREIGN PROFIT/NONPROFIT CORPORATION GREAT WESTERN DEVELOPMENT GROUP CORPORAT

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Fax: 2083526281

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.

Tc: 18506176383

	RN DEVELOPMENT GROUP CORPORATION		
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacti	ng business in Florida)
California	y under the law of which it is incorporated)	(FEI number, if a	
	y under the law of which it is incorporated)	(FEI number, if a	pplicable)
03/06/2006	5.	(Date of duration, if other	
(Date	of incorporation)	(Date of duration, if other	than perpetual)
7001 AIS CLAUCT	(SEE SECTIONS 607.1501 & 607.13	n Florida, if prior to registration) 502, F.S., to determine penalty liabi	lity)
7901 4th St N S II	E 300 St. Petersburg FL 33702		
7001 4th St N ST	(Principal offi E 300 St. Petersburg FL 33702	cc <u>street</u> address)	
TO REGINE THEFT			
7901 4(11 5) 14 5)	<u>-</u>	g address, if different)	
	(Current mailin		
	(Current mailing) 4 address of Florida registered agent: (P.C		202 5 5 7 1
	(Current mailin		2024 NO 550 NO 70 CE
Name and street	(Current mailing) 4 address of Florida registered agent: (P.C		2024 NOV 2 SECRETA
Name and stree	(Current mailing address of Florida registered agent: (P.C.) Registered Agents Inc. 7901 4th St N STE 300). Box <u>NOT</u> acceptable)	2024 NOV 22 SECRE DAGE
Name and stree	(Current mailing address of Florida registered agent: (P.C.) Registered Agents Inc. 7901 4th St N STE 300	D. Box <u>NOT</u> acceptable)	
Name and <u>stree</u> Name: ffice Address:	(Current mailing) It address of Florida registered agent: (P.C.) Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City)). Box <u>NOT</u> acceptable) Florida 33702	PH 3:
Name and stree Name: ffice Address: Registered ago aving been nam	(Current mailing address of Florida registered agent: (P.C.) Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City) ent's acceptance: ed as registered agent and to accept servi). Box NOT acceptable) Florida 33702 (Zip code) ce of process for the above state	Composition of the p
Name and stree Name: ffice Address: Registered againg been names signated in this	(Current mailing and address of Florida registered agent: (P.C. Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg (City)). Box NOT acceptable) Florida 33702 (Zip code) ce of process for the above statement as registered agent and agent.	ed corporation at the pree to act in this capac

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.

11/22/2024 11:04:36 P\$T . To: 18506176383 Page: 3/4 From: Registered Agents Inc Fax: 2083526281

A. DIRECTORS					
□Chairman	Name:	□Chairman	Name:		
□Vice Chairman	7901 4th St N STE 300 Address:	□ Vice Chairman	Address:		
≝Director	St. Petersburg FL 33702	□Director			
		□ President			
□Vice President		□ Vice President			
	☑ 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	□Other		
□Chairman	Name:	□ Chairman	Name:		
LIVice Chairman	Address:	∟Vice Chairman	Address:		
□Director		□ Director			
□President		□ President			
□Vice President		□ Vice President			
□Secretary	□Treasurer	Secretary	□Treasurer		
□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 filing your Florida Department of State Annual Report form. 12. David Ing. 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					

11/22/2024 11:04:36 PS7 , To: 18506176383 Page: 4/4 From: Registered Agents Inc Fax: 2083526281



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

Entity Name: GREAT WESTERN DEVELOPMENT GROUP

Entity No.: 2788616 **Registration Date:** 03/06/2006

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 WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 21, 2024.

SHIRLEY N. WEBER, PH.D.

CAG-/

Secretary of State

Certificate No.: 268368032

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