



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext: x61563
Date: 04/25/25
Order #: 1948107-1
Re: Powertrain, Inc.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$87.50 + penalty fees approved - FL State
Account Number: I20000000195

Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis
Issue Proof of Filing

A handwritten signature in black ink, appearing to read 'Shauna Godbolt', with a date '04/25/25' written at the end of the signature.

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PowerTrain, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Maureen Meenan

Name of Person

PowerTrain, Inc.

Firm/Company

8201 Corporate Drive, Suite 500

Address

Hyattsville, MD 20785

City/State and Zip code

mmeenan@powertrain.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maureen Meenan

at (781) 910-5568

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$70.00 Filing Fee

\$78.75 Filing Fee &
Certificate of Status

\$78.75 Filing Fee &
Certified Copy

\$87.50 Filing Fee,
Certificate of Status &
Certified Copy



RECEIVED

2025 MAY -2 PH 3: 38

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2025

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: POWERTRAIN, INC.
Ref. Number: W25000057659

We have received your document for POWERTRAIN, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L19000053678.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 025A00008974

COVER LETTER

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Maureen Meenan

Name of Person

PowerTrain, Inc.

Firm/Company

8201 Corporate Drive, Suite 500

Address

Hyattsville, MD 20785

City/State and Zip code

mmeenan@powertrain.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maureen Meenan

at (781)

910-5568

Name of Person

Area Code

Daytime Telephone Number

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Division of Corporations
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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.

1. PowerTrain, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

Use Powertrain, Inc. of Delaware
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 52-1882689
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 7/5/1994 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 97 Oak Avenue, Panama City, Florida 32401
(Principal office street address)
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

APR 75 11:22

9. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company
By: Shauna Godbolt

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

A. DIRECTORS

Chairman Name: Lisa Cox
 Vice Chairman Address: 8201 Corporate Dr #500
 Director Hyattsville, MD 20785
 President _____
 Vice President _____
 Secretary Treasurer
 Other CEO Other _____

Chairman Name: Courtney Cox
 Vice Chairman Address: 8201 Corporate Dr #500
 Director Hyattsville, MD 20785
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Lisa Sergent
 Vice Chairman Address: 8201 Corporate Dr #500
 Director Hyattsville, MD 20785
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Todd Yoder
 Vice Chairman Address: 8201 Corporate Dr #500
 Director Hyattsville, MD 20785
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 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. Lisa Cox

 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.

13. Lisa Cox, CEO

 (Typed or printed name and capacity of person signing application) OUAL-352413

Delaware

Page 1

The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POWERTRAIN, 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-THIRD DAY OF APRIL, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POWERTRAIN, INC." WAS INCORPORATED ON THE FIFTH DAY OF JULY, A.D. 1994.

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



2416046 8300

SR# 20251746792

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, reading "C. P. Sanchez".

Cheruni Patibanda-Sanchez, Secretary of State

Authentication: 203516409

Date: 04-23-25