# M24000003727

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





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DIRECTOR'S OFFICE IVISION OF CORPORALI TALLAHASSEE, FLORI

RECEIVED

MAR 25 2024 K. Brumbley





To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext:

Date: 03/22/24 Order #: 1463131-1 Re: Saturn Capital, 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: \$125.00 - FL State Account Number: I2000000195
AUTH

#### Please take the following action:

File in your office on basis Issue Proof of Filing

#### 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**

~	ion of Corporations			
SUBJECT:	Saturn Capital, Inc.			
	Name of	corporation	- must include suffix	
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign Corp f Existence," or "Certificate of ced foreign corporation to tran	f Good Stan	ding" and check are subi	
Please return a	all correspondence concerning	this matter	to the following:	
Edward Laffer	ty			
• • • • • • • • • • • • • • • • • • • •		Name of	Person	<u> </u>
Saturn Capital,	Inc.			
		Firm/Com	pany	
1101 4th Street	t S., Suite 302			
		Addre	rss	
St. Petersburg,	FL 33101			
		City/State ar	nd Zip code	
elafferty@satu	rnpartnersvc.com			
	E-mail address: (	to be used f	or future annual report no	otification)
For further inf	formation concerning this mat	ter. please c	all:	
Edward Laffert	ty at	at ()		
Name	e of Person	Area Code	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		Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	check for the following amour eck payable to: FLORIDA DEP ng Fee	ARTMENT	<b>OF STATE</b>   \$78.75 Filing Fee &   Certified Copy	S87.50 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.

Saturn Capital,	Inc.			
	orporation; must include "INCORPORATEI orp," "Inc," "Co," or "Corp.")	)," "C(	OMPANY," "CORPORATION."	
Saturn Capital A	Advisors, Inc. or Saturn Capital Group, Inc.			
(If name unavails	able in Florida, enter alternate corporate nam	ie adopti	ed for the purpose of transacting bus	iness in Florida)
Nevada .	-	04-829955		
	y under the law of which it is incorporated)	··	(FEI number, if applica	ble)
4. 12/29/2023	•	5.		
	of incorporation)	··	(Date of duration, if other than p	perpetual)
6. March 20, 2024				
1101 4th Street S	(Date first transacted business (SEE SECTIONS 607.1501 & 607. ., Suite 302, Saint Petersburg, FL 33701			
/	(Principal o	ffice <u>str</u>	eet address)	
	(Current mail	ling add	ress. if different)	2624
8. Name and <u>stree</u>	et address of Florida registered agent: (P	.O. Bo:	NOT acceptable)	7624 N. 3 2 2
Name:	Corporation Service Company			-
Office Address:	1201 Hayes Street			
	Tallahassee		. Florida <u>32301</u>	<u>ー</u>
	(City)		(Zip code)	

#### 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.



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.

A. DIRECTORS			
Chairman	Jeffrey S. McCormick Name:	□Chairman	Name: Edward A. Lafferty
□Vice Chairman	Address:	□Vice Chairman	Address: 855 Bayway Blvd., Unit 708
Director	Palmas Del Mar, Humacao, PR 00791	Director	Clearwater Beach, F1, 33767
President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	■ Secretary	<b>■</b> 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	N'ame:	□Chairman	Name:
□Vice Chairman	Address:	□ Vice Chairman	Address:
□Director		□Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	Other	□Other
individuals may be	Use an attachment to report more than six (6). The a added to the index when filing your Florida Depart	ment of State Annual Re	port form.
12. Edwar	Signature of Director	ar or Officer	
	ctor signing this document (and who is listed in num		

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.

SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, FRANCISCO V. AGUILAR, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify, that the following is a list of all organizational documents on file in this office for

Saturn Capital, Inc.

Organizational Documents on File	Filing Date
Articles of Incorporation-For-Profit	12/29/2023

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, Saturn Capital, Inc., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 12/29/2023, and is in good standing in this state.

SECRETARY OF STATE





Certificate Number: B202403184472886

You may verify this certificate online at <a href="http://www.nvsos.gov">http://www.nvsos.gov</a>

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 03/18/2024

FRANCISCO V. AGUILAR Secretary of State