

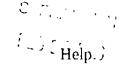
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F	OREIGN PROFIT/NONPRO	FIT COR	RPORAT	'ION
	Frantom Wor	ks inc.		
	Certificate of Status		0	
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	Estimated Charge	<u> </u>	\$70.00	

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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.

	orporation; must include "INCO	RPORATED," "CO	MPANY." "CORPORATION,"	<del></del>
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")			
(If name unavails	able in Florida, enter alternate co	rporate name adopte	d for the purpose of transacting busines	s in Florida)
<sub>2.</sub> Louisian	a	3		
(State or countr	y under the law of which it is inc	corporated)	(FEI number, if applicable)	
а 12	/13/21	5		
(Date	of incorporation)		(Date of duration, if other than perpo	etual)
6.				
o	(Date first transactions (SEE SECTIONS 607.)	ted business in Floric 1501 & 607.1502, F.:	la, if prior to registration) S., to determine penalty liability)	
<sub>7</sub> 9024 fox rui	n ave baton rouge LA 70	808		<u></u> i
··-		(Principal office stre	et address)	
9024 fox ru	n ave baton rouge L	_A 70808		
-	((	Current mailing addr	ess. if different)	<u>-</u>
				, ,
8. Name and stree	<u>et address</u> of Florida registered	i agent: (P.O. Box	NOT acceptable)	
Name:	Registered Age	ents Inc		
Office Address:	7901 4th St N S	STE 300		
	St. Petersburg (City)	,	Florida 33702	
	(City)		(Zip code)	
designated in this further agree to c	ed as registered agent and to application, I hereby accept	the appointment as all statutes relative	process for the above stated corporals registered agent and agree to act to the proper and complete perforals registered agent.	in this capacity. I
J	Duvid Coperis			
_	(Registe	ered agent's signature	2)	

under the law of which it is incorporated.

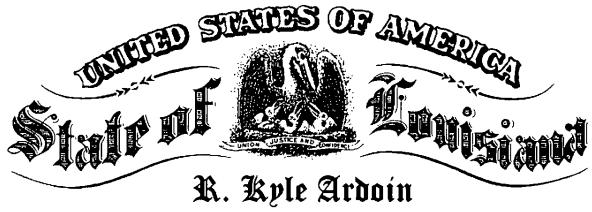
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

<sup>11.</sup> 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: Michael Frantom	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
<b>X</b> iDirector	7901 4th St N STE 300	□Director					
∏President	St. Petersburg FL 33702	□President					
□Vice President		□Vice President					
XSecretary	<b>⊠</b> Treasureτ	□Secretary	□Treasurer				
□Other	Other	□Other	Other				
□ Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		Director					
□President		□President					
□Vice President		□Vice President	- <u>-                                  </u>				
□Secretary	□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				
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. Wichael Frantom  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. Michael Frantom, President



**SECRETARY OF STATE** 

As Secretary of State of the State of Louisiana, I do hereby Certify that

## **FRANTOM WORKS INC**

A corporation domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on December 13, 2021,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

February 6, 2023

Secretary of State

Web 44706457



Certificate ID: 11683662#3PK73

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov