# <2300001723

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

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S. FRANKLIN MAR 2 4 2023

### **COVER LETTER**

TO:		tration Section on of Corporations				
SHRJI	FCT.	Reliable Repairs, Inc.				
5000	1.01.	Name of corporation - must include suffix				
Dear S	ir or M	adam;				
"Certif	icate o	"Application by Foreign Co Existence," or "Certificate red foreign corporation to tr	of Good Stand	ling" and check are subm	Business in Florida." nitted to register the	
Please	return :	all correspondence concerni	ng this matter (	to the following:		
Tanner	Fitz					
			Name of P	erson	23	
Cutler	Law Fir	m			23	
			Firm/Comp	pany	<del></del>	
140 N.	Phillips	Ave., 4th Floor			<u>1</u> :	
			Addres	ss		
Sioux F	<sup>r</sup> alls, Sf	57101-1400			ب	
	***		City/State an	d Zip code		
tannerf	@cutler	lawfirm.com				
		E-mail address	: (to be used fo	or future annual report no	otification)	
For fur	ther in	formation concerning this m	atter, please ca	all:		
Tanner	Fitz	ne of Person at (605 ) 335-4950 Area Code Daytime Telephone Number				
	Nam	e of Person	Area Code	Daytime Telepho	one Number	
	Regis Divis The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303		MAILING AD Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction rporations	
Please i	make ch	check for the following amorek payable to: FLORIDA DE ng Fcc	EPARTMENT g Fee &	OF STATE \$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.

	adopted for the purpose of transacting bus	iness in Florida)
-	·	
under the law of which it is incorporated)	(FEI number, if applica	
		perpetual)
(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
Circle, Sioux Falls, SD 57108		
(Principal offi	ice <u>street</u> address)	
(Current mailir	ng address. if different)	
	D. Box <u>NOT</u> acceptable)	1
Chris Degraw	<u>.</u>	Þ
1180 8th Ave., #423		٠ دِي
Palmetto	, Florida 34221	
(City)	(Zip code)	
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.1501 of firele, Sioux Falls, SD 57108  (Principal off (Current mailing traddress of Florida registered agent: (P.C.)  Chris Degraw  1180 8th Ave., #423	(Date of duration, if other than profine of incorporation)  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  Circle, Sioux Falls, SD 57108  (Principal office street address)  (Current mailing address, if different)  t address of Florida registered agent: (P.O. Box NOT acceptable)  Chris Degraw  1180 8th Ave., #423  Palmetto , Florida 34221

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			Justin Noteboom
□Chairman	Name:	□Chairman	Name: 8217 S Grass Creek Drive
□Vice Chairman		□Vice Chairman	Address:
Director	Sioux Falls, SD 57108	□Director	Sioux Falls, SD 57108
President		□President	
□Vice President		■Vice President	
		■Secretary	☐Treasurer
Other	Other	☐Other	Other
□ Chairman	Name:	□ Chairman	Name:
∐Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	
□President		□President	
		□Vice President	
	☐ Treasurer	☐Secretary	Treasurer
□ Secretary		□Other	□Other
□Other	Other	Gottler	7023
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□Director	<del></del>
□ President		□President	
□Vice President		□Vice President	
Secretary	□Treasurer	□ Secretary	□Treasurer
□Other		□Other	Other
individuals may l	Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department	till of place , illinoar .	
12			
The officer or dishe is aware that s.817.155, F.S.	rector signing this document (and who is listed in number false information submitted in a document to the Department	er 11 above) affirms tment of State consti	that the facts stated herein are true and that he or tutes a third degree felony as provided for in

# State of South Dakota

Office of the Secretary of State

## **Certificate of Good Standing**

**Domestic Business Corporation** 

I, Monae L. Johnson. Secretary of State of the State of South Dakota, hereby certify that

#### Reliable Repairs, Inc.

Business ID: DB244539

was authorized to transact business in this state on: February 15, 2023.

I. further certify that **Reliable Repairs**, **Inc.** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, February 17, 2023.

Monae L. Joans

02/17/2023 10:01 AM

Verification #: 016332425

Monae L. Johnson Secretary of State