

CK#: 3112901222

Deposit Number

000752

Amnt: \$500.00

APPLICATION

CK Date: 08/15/24

This is an application for (check one):

KH

Original certificate (new company)

Copy

Deposit Date

AUG 23 2024

Approval of transfer of existing certificate: Example, a non-certificated company purchases an existing company and desires to retain the original certificate rather than apply for a new certificate.

Dkt. #: 20240127

Please provide the following:

1. Full name of company, including fictitious name(s), that must match identically with name(s) on file with the Florida Department of State, Division of Corporations registration:

COMEXCEL TECHNOLOGIES CORPORATION

2. The Florida Secretary of State corporate registration number:
P23000083415

3. F.E.I. Number: 93-4721286

4. Structure of organization:

The company will be operating as a:
(Check all that apply):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Corporation | <input type="checkbox"/> General Partnership |
| <input type="checkbox"/> Foreign Corporation | <input type="checkbox"/> Foreign Partnership |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Partnership |
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Other, please specify below: |

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2024 AUG 23 PM 3:09
COMMISSION CLERK

If a partnership, provide a copy of the partnership agreement.

If a foreign limited partnership, proof of compliance with the foreign limited partnership statute (Chapter 620.169, FS). The Florida registration number is:

5. Who will serve as point of contact to the Commission in regard to the following?

(a) This application:

Name: GEORGE KINGSBERG
Title: PRESIDENT
Street Address: 2800 MARINA MILE BLVD
Post Office Box: STE 119
City: FORT LAUDERDALE
State: FLORIDA
Zip: 33312
Telephone No.: 754-800-9000
Fax No.: 954-584-0808
E-Mail Address: georgekingsberg@comexcel.com

(b) Ongoing operations of the company:

(This company liaison will be the point of contact for FPSC correspondence. This point of contact can be updated if a change is necessary but this must be completed at the time the application is filed).

Name: BRIAN LEEBER
Title: GENERAL MANAGER
Street Address: 2800 MARINA MILE BLVD
Post Office Box: STE 119
City: FORT LAUDERDALE
State: FLORIDA
Zip: 33312
Telephone No.: 754-800-9000 EXT 125
Fax No.: 954-584-0808
E-Mail Address: brianleeber@comexcel.com
Company Homepage: www.comexcel.com

(c) Optional secondary point of contact or liaison:

(This point of contact will not receive FPSC correspondence but will be on file with the FPSC).

Name: AJ SINGH
Title: TECHNICAL MANAGER
Street Address: 2800 MARINA MILE BLVD
Post Office Box: STE 119
City: FORT LAUDERDALE
State: FLORIDA
Zip: 33312
Telephone No.: 754-800-9000 EXT 117
Fax No.: 954-584-0808
E-Mail Address: aj@comexcel.com