RI SOS Filing Number: 201751357760 Date: 10/11/2017 1:59:00 PM



State of Rhode Island and Providence Plantations

**Department of State - Business Services Division** 

## **Certificate of Authority**

**FOREIGN Corporation** 

→ Filing Fee. \$310.00 minimum

Pursuant to the provisions of RIGL 7.1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement

| 1 The name of the corporation is  |                        |                           |  |  |  |
|---|------------------------|---------------------------|--|--|--|
| Sentry Data Systems, Inc  |                        |                           |  |  |  |
| 2 It is incorporated under the laws of Florida  |                        |                           |  |  |  |
| 3 The name if different, which it elects to use in Rho  | ode Island is:         |                           |  |  |  |
| (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island |                        |                           |  |  |  |
| (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application                                 |                        |                           |  |  |  |
| 4 The date of its incorporation is: 07/11/2003  |                        |                           |  |  |  |
| And the period of its duration is CHECK ONLY ONE  Perpetual (on-going)  Date certain for dissolution  | ЕВОХ                   | de gere de Paris November |  |  |  |
| 5. The address of its principal office is:  |                        |                           |  |  |  |
| 800 Fairway Drive Suite 400, Deerfield Beach, FL 33441  |                        |                           |  |  |  |
| 6. The name and address of the initial registered agent/office of in Rhode Island:  |                        |                           |  |  |  |
| Agent Name National Registered Agents, Inc.   |                        |                           |  |  |  |
| Street Address (NQT a PO. Box) 450 Veterans Memor   | rial Parkway, Suite 7A |                           |  |  |  |
| City/Town<br>East Providence  | State RHODE ISLAND     | Zip Code<br>02914         |  |  |  |
| MAIL TO:<br>Division of Business Services<br>148 W. River Street, Providence, Rhode Island 02904-2615<br>Phone: (401) 222-3040  |                        | D C<br>017 1:59           |  |  |  |

Website: www.sos.ri.gov

BY CU 314598

| state or country of whi  | ich it is incorpora                    | ated)                            | (optional, unless di                 | rectors are required under the laws of the  |  |
|--|--|----------------------------------|--------------------------------------|---|--|
| NAME   |  | ADDRESS                          |                                      |   |  |
| Travis Leonardi 800 Fairway Drive Si                                   |  | 800 Fairway Drive Su             | tte 400, Deerfield Beach, FL 33441   |   |  |
| John Randazzo 800 Fairway Dr   |  | 800 Fairway Drive Sui            | Suite 400, Deerfield Beach, FL 33441 |   |  |
|  |  |                                  |                                      |   |  |
|  |  |                                  |                                      | Check the box to indicate an attachment   |  |
| or the state or country  | respective addre<br>of which it is inc | orporated)                       | officers (mandatory                  | if directors are not required under the laws  |  |
| OFFICE   |  | NAME                             |                                      | ADDRESS   |  |
| PRESIDENT  | Brent Stone                            |                                  | 800 Fairway Driv                     | e Suite 400, Deerfield Beach, FL 33441  |  |
| VICE PRESIDENT   |  |                                  |                                      |   |  |
| TREASURER  |  |                                  |                                      |   |  |
| SECRETARY  | T J. Rose                              |                                  | 800 Fairway Driv                     | e Suite 400, Deerfield Beach, FL 33441  |  |
|  |  |                                  |                                      | Check the box to indicate an attachment.  |  |
| 9 The aggregate number par value, and series, in particular par value. | per of shares while any, within a cl   | ich it has authority to ass, is. | issue; itemized by                   | classes, par value of shares, shares withou   |  |
| NUMBER OF SHARES   | CLASS                                  | s                                | SERIES                               | PAR VALUE OR STATE NO PAR VALUE   |  |
| 50,000,000   | Common                                 |                                  |                                      | \$0.0100  |  |
|  |  |                                  |                                      |   |  |
|  | •                                      |                                  |                                      |   |  |
|  | -                                      |                                  |                                      |   |  |
|  |  |                                  |                                      |   |  |
| 10 (a) Estimate, in do<br>owned by the corporati<br>located            | allars, the value of on for the follow |                                  |                                      | illars, the value of the corporation's property<br>in Rhode Island during the following year. |  |
| \$_30,000,000  |  | \$0_                             | \$                                   |   |  |
| ·  |  |                                  |                                      |   |  |

| 11 (a) Estimate in dollars the arrest amount of himself  | T  |  |  |  |
|--|--|--|--|--|
| 11 (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.   | (b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year |  |  |  |
| \$_94,000,000  | s <u>680,000</u>   |  |  |  |
| (c) Estimate, <b>as a percentage</b> , the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year <i>Note Divide</i> (11b) by (11a) and multiply by 100 to obtain the percentage. |  |  |  |  |
| %  |  |  |  |  |
| 12 This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document   |  |  |  |  |
| 13 Date when the Certificate of Authority will be effective CHECK ONLY ONE BOX   |  |  |  |  |
| ■ Date received (Upon filing)  |  |  |  |  |
| Later effective date (Date must be no more than 90 days from the day of filing)  |  |  |  |  |
| Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.  |  |  |  |  |
| Type or Print Name of Authorized Office:   | Date   |  |  |  |
| Thomas Tran  | 7/5/2017   |  |  |  |
| Signature of Authorized Officer of the Corporation   |  |  |  |  |

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

## Attachment to Rhode Island Officers & Directors

1 Full Name: Travis Leonardi
Officer/Director: Officer, Director

Officer's Title: CEO

Business Address: 800 Fairway Drive Suite 400

City: Deerfield Beach

State: FL ZIP Code: 33441

2 Full Name: Thomas Tran

Officer/Director: Officer

Officer's Title: CFO & COO

Business Address: 800 Fairway Drive Suite 400

City: Deerfield Beach

State: FL ZIP Code: 33441

## State of Florida Department of State

I certify from the records of this office that SENTRY DATA SYSTEMS, INC. is a corporation organized under the laws of the State of Florida, filed on July 11, 2003, effective July 9, 2003.

The document number of this corporation is P03000077642.

I further certify that said corporation has paid all fees due this office through December 31, 2017, that its most recent annual report/uniform business report was filed on April 18, 2017, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Eleventh day of October, 2017



Ken Detorn \_ Secretary of State

Tracking Number: CU1468113931

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

October 11, 2017 01:59 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

