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2025 FEB 12 AM 5: 16

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: CyberCodex, Inc				
SUBJECT:	ame of corporation	- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign "Certificate of Existence," or "Certificate of encountered foreign corporation above referenced foreign corporation."	ficate of Good Stand	ling" and check are submitt		
Please return all correspondence cor	cerning this matter	to the following:		
Alexander Taft				
	Name of P	erson	-	
CyberCodex, Inc				
	Firm/Comp	pany		
1401 Longfellow St NW				
	Addre	SS		
Washington, DC 20011				
	City/State an	d Zip code		
ceo@arbitrsecurity.com				
E-mail ad	dress: (to be used fo	or future annual report notif	ication)	
For further information concerning t	his matter, please ca	11:		
Alexander Taft	at (202	904-7176		
Name of Person	Area Code	Daytime Telephone	e Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration Secti Division of Corpo P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
•	DA DEPARTMENT	OF STATE \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee. Certificate of Status	

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.

CyberCodex, Ir	c.		
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATIO	N."
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacti	ng business in Florida)
		•	=
(State or country	y under the law of which it is incorporated)	93-3517250 (FEI number, if a	pplicable)
9/18/2023	5	perputual	
(Date	of incorporation) 5	(Date of duration, if other	than perpetual)
n/a, expected M	arch 1		
	(Date first transacted business		
9.13.1 C		502, F.S., to determine penalty liabil	nty)
·———————	Vista Circle		
9421 East Vall		fice street address)	
8421 East Valley	Vista Circle, Mesa, AZ 85207	ng address, if different)	
	(Current main	ng address, it different)	
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	
Name:	Peter M Hay		2025 FEB 12
	3025 N 1st Ave		
Office Address:	3023 14 131 1410		72
	Milton	, Florida <u>32583</u>	2 A 5: 10 2 A 5: 10 2 C 5:
	(City)	(Zip code)	700 0
laving been nam	ent's acceptance: ed as registered agent and to accept serv application, I hereby accept the appoint		d corporation at the place wee to act in this capacity

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	Name: Peter M Hay	□Chairman	Name:		
□ Vice Chairman	Address: 3025 North 1st Avenue	□Vice Chairman	Address:		
■Director	Milton, FL 32583	Director	Mesa, AZ 85207		
□President		□President			
□Vice President		□Vice President			
□Secretary	Treasurer	□Secretary	□Treasurer		
Other	Other	□Other	Other		
□ Chairman	Name: Alexander Taft 1401 Longfellow St NW	□ Chairman	Name:		
□Vice Chairman	Address: Washington, DC 20011		Address:		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□Secretary	□Treasurer		
■Other		Other			
			N.		
□ 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		
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. 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					

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. Alexander Taft





STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

CyberCodex, Inc.

ACC file number: 23583723

was incorporated under the laws of the State of Arizona on 09/18/2023;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave bereunto set my hand, affixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 02/12/2025

Douglas R. Clark, Executive Director

Mal K.Clark



