



FOREIGN REGISTRATION STATEMENT

For Office Use Only -FILED-

	pter 21, Idaho Cod	10	File #: 0004458987	
Page Silver for	4400 00 + 600 00 5-	manual proposition (form miles to a	Date Filed: 10/18/2021 10:45	5:00 A
Base Filing fee:	\$ 100.00 + \$20.00 for	manual processing (form must be t	ypea,.	
The name of the entity is: St	ratic Inc			
·			·	
The name which it shall use	in Idaho is: <u>Stratis,</u>			
Select the type of entity you	wich to register:	(Enter a name here only if you are required	l to adopt an alternate name)	
Business Corporation	N=	l Partnership		
☐ Nonprofit Corporation		l Cooperative Association		
☐ Nonprofit Corporation ☐ Limited Liability Partnershi		Partnership (Including a limited liab	ility limited nartnershin	
☐ Limited Liability Company	· ·	ry Trust, Business Trust, or Common	-	
Other:		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	( <b>Use</b> "Other" o	nly if your foreign entity type is not listed abor	ve, and enter the type here.t	
Jurisdiction of formation: Wi				
		ne domestic juriodiction where the entity was	formed)	7 3
The address of its principal o			= ± ±	
912 Huber Dr., Monroe,	, MI 48162			
(Street Address)	50000 0=0:	<del></del>		
PO Box 794, Sheboygan, V	WI 53082-0794			
(Mailing Address, if different)				
The address of its domestic	principal office (if requ	ired by the laws of the jurisdiction of	f formation) is:	
(Street Address)				
* * ** ** * * * * * * * * * * * * * *				
(Mailing Address of different)			-	
(Mailing Address of different)	n correspondence sho	ould be addressed, if different from it	em 5, is:	
(Mailing Address of different) The mailing address to which	n correspondence sho	ould be addressed, if different from it	em 5, is:	
(Mailing Address of different)  The mailing address to which  (Address)		· · · · · · · · · · · · · · · · · · ·	em 5, is:	
(Mailing Address of different) The mailing address to which (Address) Name and street address of	registered agent <u>in ld</u>	<u>aho</u> :	em 5, is:	-,,-
(Mailing Address of different) The mailing address to which (Address) Name and street address of C T Corporation System, 9	registered agent <u>in ld</u>	· · · · · · · · · · · · · · · · · · ·	em 5, is:	
(Mailing Address of different) The mailing address to which (Address) Name and street address of	registered agent <u>in Id</u>	<u>aho</u> :	em 5, is:	
(Mailing Address of different)  The mailing address to which  (Address)  Name and street address of  C T Corporation System, 9  (Name and Address)	registered agent <u>in Id</u> 21 South Orchard St	aho: reet, Suite G, Boise, ID 83705	em 5, is:	
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## United States of America

#### State of Wisconsin



### DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, Patti Epstein, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

## STRATIS, INC.

is a domestic corporation or limited liability company organized under the laws of this state and that its date of incorporation or organization is March 4, 2020.

I further certify that the following charter documents changing the entity name have been duly filed with this department, namely: Articles of Amendment filed May 21, 2021 changing the entity name from DOUBLE K CONNECT, INC. to the current name.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on September 16, 2021.

PATTI EPSTEIN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

Patti Gostein

By: Sierra Knodle