# F23000006214

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
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### **CT CORP**

#### (850) 656- 4724 3558 lakesore Drive Tallahassee, FL 32312

11/01/2023

| D  | ate:                          | 11/01/2023                                | a: N   |  |
|--|-------------------------------|---|--|--|
|  | •                             | Acc#I20160000072                          | 4. ( ) = V                                     |  |
| Name:  | biospatial, Ir                | nc.                                       |  |  |
| Document #:  |                               |   |  |  |
| Order #:   | 15201510                      |   |  |  |
| Certified Copy of Arts<br>& Amend:<br>Plain Copy:<br>Certificate of Good<br>Standing:<br>Certified Copy of |                               |   |  |  |
| Apostille/Notarial<br>Certification:   |                               | Country of Destination:  Number of Certs: |  |  |
| Filing:  | Certified:<br>Plain:<br>COGS: |   | Email Address for Annual Report Notifications: |  |
| Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#                                   | Amount: S                     | 78.75                                     |  |  |

Thank you!

#### **COVER LETTER**

|                                 | tration Section<br>ion of Corporations  |                             |   |  |
|---------------------------------|---|-----------------------------|---|--|
| SUBJECT:                        | biospatial, Inc.  |                             |   |  |
| 0000000                         | Name of   | corporation - m             | st include suffix   |  |
| Dear Sir or M                   | adam:   |                             |   |  |
| "Certificate o                  | "Application by Foreign Corp<br>f Existence," or "Certificate o<br>ced foreign corporation to trai  | f Good Standing             | " and check are submit  | usiness in Florida,"<br>ted to register the                        |
| Please return                   | all correspondence concerning   | g this matter to th         | ne following:   |  |
| Jonathan Woo                    | dworth  |                             |   |  |
|                                 |   | Name of Perso               | on  |  |
| biospatial, Inc.                |   |                             |   |  |
|                                 |   | Firm/Company                | ,   | <u> </u>   |
| 4819 Emperor                    | Boulevard, Suite 400  |                             |   |  |
| <del></del>                     |   | Address                     |   |  |
| Durham, North                   | Carolina 27703  |                             |   |  |
|                                 |   | City/State and Z            | ip code   |  |
| jon.woodwortl                   | n@biospatiaLio  |                             |   |  |
|                                 | E-mail address:   | (to be used for fu          | ture annual report noti   | fication)  |
| For further in                  | formation concerning this ma-   | tter, please call:          |   |  |
| Kaitlyn Cerne                   | a   | t (919 )                    | 28-8874<br>Daytime Telephon   |  |
| Nam                             | e of Person   | Area Code                   | Daytime Telephon  | e Number   |
| Regis<br>Divis<br>The C<br>2415 | EET/COURIER ADDRESS:<br>stration Section<br>ion of Corporations<br>Centre of Tallahassee<br>N. Monroe Street, Suite 810<br>hassee, FL 32303 | :                           | MAILING ADD<br>Registration Sect<br>Division of Corpe<br>P.O. Box 6327<br>Tallahassee, FL | ion<br>orations  |
|                                 | check for the following amounteek payable to: FLORIDA DEI ing Fee   | PARTMENT OF<br>Fee & X \$78 | STATE<br>3.75 Filing Fee & [<br>rtified Copy  | ☐ \$87.50 Filing Fee,<br>Certificate of Status &<br>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.

| biospatial, Inc.  |  |  |                                       |
|---|--|--|---------------------------------------|
| (Enter name of c  | orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.") | D," "COMPANY," "CORPORATION,"  |                                       |
| (If name unavail  | able in Florida, enter alternate corporate nam                       | ne adopted for the purpose of transacting business in Flor   | rida)                                 |
| 2. Delaware   |  | 3  |                                       |
| (State or countr  | y under the law of which it is incorporated)                         | 3(FEI number, if applicable)   | — <del>—</del>                        |
| November 22, 2  |  | 5. (Date of duration, if other than perpetual)   |                                       |
|   | of incorporation)  | (Date of duration, if other than perpetual)  |                                       |
| 6   |  |  |                                       |
|   |  | s in Florida, if prior to registration)<br>(1502, F.S., to determine penalty liability)  |                                       |
| 7 4819 Emperor Bo   | oulevard, Suite 400, Durham, North Carolina                          | a 27703  |                                       |
| <u> </u>  | (Principal o   | office street address)   |                                       |
|   |  |  |                                       |
|   | (Current mai   | iling address, if different)   |                                       |
| 8. Name and street  | et address of Florida registered agent: (I                           | P.O. Box NOT acceptable)   |                                       |
| Name:   | C T Corporation System   |  | _                                     |
| Office Address:   | 1200 South Pine Island Road  |  |                                       |
|   | Plantation   | , Florida  | 6 g                                   |
|   | (City)   | (Zip code)   | · · · · · · · · · · · · · · · · · · · |
| Having been nan<br>designated in this<br>further agree to c | s application. I hereby accept the appoin                            | rvice of process for the above stated corporation and interest as registered agent and agree to act in this is relative to the proper and complete performance position as registered agent. | t the place<br>capacity, I            |
|   | Dav Dav  | id Westcott Assistant Secretary  |                                       |

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.

(Registered agent's signature)

| A. DIRECTORS  |   |                                     |   |  |
|---|---|-------------------------------------|---|--|
| □ Chairman  | Name: David Gardner   | □ Chairman                          | Name:   |  |
| □Vice Chairman  | Address:  | □Vice Chairman ■ Director           | Address: 4819 Emperor Boulevard                     |  |
| Director  | Suite 400   |                                     | Suite 400   |  |
| □President  | Durham, North Carolina 27703  | □President                          | Durham, North Carolina 27703                        |  |
| □Vice President                                       |   | □Vice President                     |   |  |
| ☐ Secretary   | Treasurer   | ☐ Secretary                         | □Treasurer  |  |
| Other   | □Other  | Other                               | Other   |  |
| ☐ Chairman ☐ Vice Chairman ☐ Director                 | Paul Runkle Name: 4819 Emperor Boulevard Address: Suite 400   | □Chairman □Vice Chairman ■ Director | Suite 400   |  |
| □President  | Durham, North Carolina 27703  | □President                          | Durham, North Carolina 27703                        |  |
| □ Vice President                                      |   | □Vice President                     |   |  |
| Secretary   | □Treasurer  | □Secretary                          | □Treasurer  |  |
| Other   | Other   | Other CEO                           | Other   |  |
| □Chairman   | Christopher Brian Lunsford  | □ Chairman                          | <del></del>   |  |
| □Vice Chaiπnan  | Address:  | □ Vice Chairman                     | Address: 4819 Emperor Boulevard                     |  |
| Director  | Suite 400   |                                     | Suite 400   |  |
| □President  | Durham, North Carolina 27703  | □President                          | Durham, North Carolina 27703                        |  |
| □Vice President                                       |   | □Vice President                     |   |  |
| Secretary   | □Treasurer  | Secretary                           | ☐ Treasurer   |  |
| CTO CTO   |   | Other COO                           | Other   |  |
| The officer or direshe is aware that fs.817.155, F.S. | Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department Woodworth  Signature of Director sector signing this document (and who is listed in numbers information submitted in a document to the Department (woodworth). Chief Executive Officer | or Officer                          | hat the facts stated herein are true and that he or |  |
|   | Voodworth, Chief Executive Officer  |                                     |   |  |



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BIOSPATIAL, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FIRST DAY OF NOVEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 204495458

Date: 11-01-23

6225487 8300 SR# 20233867419