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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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date of submission 5/20

Foreign Limited Liability Company
Bristlecone Services, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

2016 MAY 24 AM 10:30

CALLAHAN@FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 MAY 20 AM 10:28

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POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT Bristlecone, Inc ("Corporation"), a Corporation incorporated under the laws of the state of Delaware, does hereby appoint Crystal McKenzie, Christine Rein, Kelly Lettmann, Michelle Donato, Laura Louis, Mandy Hendricks, Dareth Jeffers, Russell Kopp, Collin Menkhus, Alan Stachura, Dana Young, Britni Wige, Erin Franceschi, Sarah Revelle, Ryan Nelson, Traci Houck, Jenifer Vincent, Carline Smith, Angela Lamaruggine, Samantha Earls, Nicole Chouinard , employees of CT Corporation and acting solely in the capacity as employees of CT Corporation, as attorney-in-fact for the Corporation to act for the Corporation and in the Corporation's name for the limited purposes authorized herein.

The Corporation and the subsidiary entities listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to qualify the Corporation in any state, file annual reports, annual registrations and forms of similar import as directed and authorized by the Corporation.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Crystal McKenzie, Christine Rein, Kelly Lettmann, Michelle Donato, Laura Louis, Mandy Hendricks, Dareth Jeffers, Russell Kopp, Collin Menkhus, Alan Stachura, Dana Young, Britni Wige, Erin Franceschi, Sarah Revelle, Ryan Nelson, Traci Houck, Jenifer Vincent, Carline Smith, Angela Lamaruggine, Samantha Earls, Nicole Chouinard shall exercise the power of Vice President or Secretary.

This Power of Attorney expires when revoked by the undersigned.

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this 10/29/2015.

Bristlecone, Inc
A Delaware Corporation

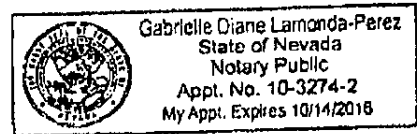
By: [Signature]
Name: Dustin Wunderlich
Title: CEO/ Founder

State of Nevada
County of Washoe

On 10/29/2015 before me, the undersigned, a Notary Public in and for said State, personally appeared Dustin Wunderlich personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and official seal.

[Signature]
Gabrielle Diane LaMonda-Perez, Notary Public



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. BRISTLECONE SERVICES, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Nevada 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Upon Qualification
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. One East Liberty Street Suite 408, Reno, NV 89501

(Street Address of Principal Office)

6. Same

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Bristlecone, Inc., Member, One East Liberty Street Suite 408, Reno NV 89501

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Jenifer Vincent
Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.455, F.S.)

Jenifer Vincent
Typed or printed name of signee

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MAY 20 AM 10:28
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

BRISTLECONE SERVICES, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System
(Name)

1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation FL 33324
City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

C T Corporation System

By: Kimberly Steinmetz Kimberly Steinmetz, VP & Asst. Sec.
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 20 10:28 AM

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SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **BRISTLECONE SERVICES, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 10, 2016, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 18, 2016.

BARBARA K. CEGAVSKE
Secretary of State



Electronic Certificate
Certificate Number: C20160518-2434
You may verify this electronic certificate
online at <http://www.nvsos.gov/>

From: Henrique Tsukamoto Fax: (781) 770-0006

To:

Fax: +1 (850) 6176383

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