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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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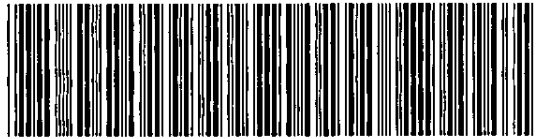
(Business Entity Name)

(Document Number)

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JAN 20 2016
J. HARRIS



ATTORNEYS AT LAW
100 NORTH TAMPA STREET, SUITE 2700
TAMPA, FLORIDA 33602-5810
P.O. BOX 3391
TAMPA, FLORIDA 33601-3391
TELEPHONE: 813.229.2300
FACSIMILE: 813.221.4210
WWW.FOLEY.COM

FACSIMILE TRANSMISSION

Total # of Pages (Excluding Cover) 3

To:	8502456893
From:	ARecchio@foley.com
Date:	1/20/2016

Delivery Details:

Dear Kyle: Attached is the revised qualification and the consent letter authorizing release of name. If possible, please forward evidence to me via fax 813-221-4210. Thank you again for your help.

CONFIDENTIALITY NOTICE: THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENTS NAMED ABOVE. THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION, AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR ANY AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR, AND THAT ANY REVIEW, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.

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.

KnowBe4, Inc.

1. KnowBe4, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

Delaware

27-3205919

2. January 19, 2016 3. Perpetual
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. Upon qualification 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. 33 North Garden Avenue, Suite 1200, Clearwater, Florida 33755
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 33 North Garden Avenue, Suite 1200, Clearwater, Florida 33755
(Principal office address)
33 North Garden Avenue, Suite 1200, Clearwater, Florida 33755
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Sjoerd Spouwerma

Office Address: 33 North Garden Avenue, Suite 1200,

Clearwater 33755
(City) (Zip code)

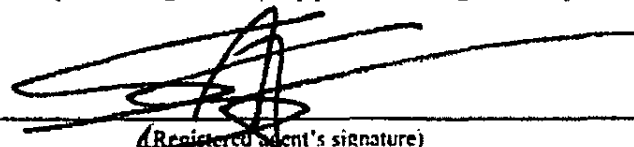
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AND
FILED

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Director: Sjoerd Sjouwerman

~~XXXXXXXXXX~~

33 North Garden Avenue, Suite 1200,

Address:

Clearwater, Florida 33755

Director: Kevin Mitnick

~~XXXXXXXXXX~~

33 North Garden Avenue, Suite 1200,

Address:

Clearwater, Florida 33755

Alex Eckelberry

Director:

33 North Garden Avenue, Suite 1200,

Address:

Clearwater, Florida 33755

Jeremiah Daly

Director:

One Marina Park Drive, Suite 900

Address:

Boston, Massachusetts 02210

B. OFFICERS

Sjoerd Sjouwerman

President:

33 North Garden Avenue, Suite 1200,

Address:

Clearwater, Florida 33755

Vice President:

Address:

Sjoerd Sjouwerman

Secretary:

33 North Garden Avenue, Suite 1200, Clearwater, Florida 33755

Address:

Sjoerd Sjouwerman

Treasurer:

33 North Garden Avenue, Suite 1200, Clearwater, Florida 33755

Address:

NOTE: If necessary, you may attach an addendum to this application listing additional officers and/or directors.

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 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.

Sjoerd Sjouwerman, President

13.

(Typed or printed name and capacity of person signing application)

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The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KNOWBE4, 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 NINETEENTH DAY OF JANUARY, A.D. 2016.

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.




Jeffrey W. Bullock, Secretary of State

4858473 8300

SR# 20160288834

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 201694813

Date: 01-19-16