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### **COVER LETTER**

TO: Registration Section		
Division of Corporations		
SUBJECT: //DNet lechno	logies The	
Name of corporation	logies, Inc.	
, number suspension		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good St		
above referenced foreign corporation to transact busi		
<b>.</b>		
Please return all correspondence concerning this mat	er to the following:	
Bevin Amys		
	f Person	
11.11 1 1 1 100	<del></del>	
UpNet Technologies	Ine Box	
Y Firm/Co	ompany Fig. 1	
7825 Washington A	ve S. Ste \$500 -	
Add	iress SS -	
Minneapolis, MN, 5 City/State	5479 B T M	
City/State	and Zip code	
A ti a matta	and Zip code	
Accounting @ upnettec.co E-mail address: (to be use	d for future annual report notification)	
	,	
For further information concerning this matter, pleas	e call:	
1	22 22 4	
Levin Hmys at 95	2) 239-2324  Daytime Telephone Number	
Name of Person Area C	ode Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, FL 32314	
Tallahassee, FL 32301		
Enclosed is a check for the following amount:		
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee,	
Certificate of Status	Certified Copy Certificate of Status &	
	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. Up Net Technologies, Inc.
(Entername of corporation; must include TNCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated)

3. 95-4552424

(FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) ashington Ave S. ste 450 Minneapolis, MN. 55439

(Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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 Chairman: Vice Chairman: Director: Address: **B. OFFICERS** Treasurer: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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.

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

## State of California Secretary of State

CERTIFICATE OF STATUS

#### ENTITY NAME:

UPNET TECHNOLOGIES, INC.

FILE NUMBER:

C1952046

FORMATION DATE:

11/01/1995

TYPE:

DOMESTIC CORPORATION

JURISDICTION: CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 27, 2016.

> ALEX PADILLA Secretary of State