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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

2016 APR 11 PM 4: 53

MELLAMASSEL TEBRIDA

March 30, 2016

ANN HARWARD 520 ZANG STREET, SUITE 209 BROOMFIELD, CO 80021

SUBJECT: TOWNCLOUD, INC. Ref. Number: W16000023403

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We have received your document for TOWNCLOUD, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$650.00.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 916A00006476

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: TownCloud, Inc.			
Name of corporation - must include suffix			_
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to regabove referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter to the following:	T.83	2.A	
Ann Harward			
Name of Person		3	_ <u>_</u> _
TownCloud, Inc.			17
Firm/Company	声込	72	
520 Zang Street, Suite 209		[2]	
Address	**	ထ	-
Broomfield, CO 80021			
City/State and Zip code			
aharward@towncloud.com			
E-mail address: (to be used for future annual report notification)			_
For further information concerning this matter, please call:			
Ann Harward at (720) 639-4403			
Name of Person Area Code & Daytime Telephone Number	•		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclosed is a check for the following amount:			
1.4	Filing . Teate of	Statu	ıs &

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.

(If name unavaila	able in Florida, enter alternate corporate	name adopted for the purpose of transacting bu	isiness in Florida)
Colorad	0	_{3.} 47-1374073	
(State or countr	y under the law of which it is incorporate		able)
06/24/20	14	_{5.} perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist	st or "perpetual")
01/01/20			
		iness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)	
520 Zang	Street, Suite 209, Brod		71.T SEOI 98.
JEU Zung	(Principal office		
520 Zang	Street, Suite 209, Broom		
	(Current mailin		- 1 mg
Name and stree	<u>et address</u> of Florida registered agent	t: (P.O. Box NOT acceptable)	\$ 48
Name:	Northwest Registered Age	ent, LLC	~
fice Address:	3030 N. Rocky Point Dr., Su	uite 150A	
	Tampa	. Florida 33607	
	(City)	(Zip code)	
Registered ag aving been nam signated in this rther agree to c	(City) ent's acceptance: ned as registered agent and to accep application, I hereby accept the ap omply with the provisions of all state	, i lorida	to act in this ca
_	Dan Keen,	Manager	_

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: Dennis Harward Address: 520 Zang Street, Suite 209 Broomfield, CO 80021 Vice Chairman: _____ Address: __ Director: _ Address: _ **B. OFFICERS** President: Dennis Harward Address: 520 Zang Street, Suite 209 Broomfield, CO 80021 Vice President: Address: ___ Secretary: Ann Harward Address: 520 Zang Street, Suite 209, Broomfield, CO 80021 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 12 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. 13. Dennis J. Harward, President

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I. Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

TownCloud, Inc.

is a

Corporation

formed or registered on 06/24/2014 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20141385164.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/21/2016 that have been posted, and by documents delivered to this office electronically through 03/24/2016 @ 14:00:28.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/24/2016 @ 14:00:28 in accordance with applicable law. This certificate is assigned Confirmation Number 9566520 .



Mayne N. Williams

Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz-CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."