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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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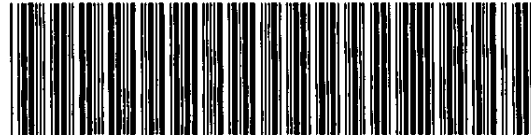
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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JAN 11 2017
S. YOUNG

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 JAN 10 PM 4:58

COVER LETTER

TO: Registration Section
Division of Corporations
Athena Bitcoin, Inc.

SUBJECT: _____
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:
Eric Gravengaard

_____	Name of Person
Athena Bitcoin, Inc.	
_____	Firm/Company
1046 W. Kinzie St, unit 301	
_____	Address
Chicago, IL, 60642	
_____	City/State and Zip code
eric@athenabitcoin.com	

E-mail address: (to be used for future annual report notification)	

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STATE
SECRETARY OF
TALLAHASSEE, FL 32314
JAN 10 PM 4:58

For further information concerning this matter, please call:

Brian Schwartz	773	458-3422
_____	at (_____)	_____
Name of Person	Area Code	Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, 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.*

Athena Bitcoin, Inc.

1. _____
(Enter name of corporation; must include "INCORPORATED," "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)
Delaware 475202014

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
09/18/16

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
08/10/2016

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
1046 W. Kinzie St, Unit 301, Chicago, IL, 60642

7. _____
(Principal office address)

(Current mailing address, if different)

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

InCorp Services, Inc.

Name: _____

17888 67th Court North

Office Address: _____

Loxahatchee

33470

_____, Florida _____
(City) (Zip code)

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.



Leora Nealey on behalf of InCorp Services, Inc.

(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.

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STATE
SECRETARY OF STATE
JAN 10 2016
17 JAN 10 PM 14:58

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Eric Gravengaard

1046 W. Kinzie St, Unit 301

Address: _____

Chicago, IL, 60642

Director: Edward Weinhaus

1046 W. Kinzie St, Unit 301

Address: _____

Chicago, IL, 60642

B. OFFICERS

President: Eric Gravengaard

1046 W. Kinzie St, Unit 301

Address: _____

Chicago, IL, 60642

Vice President: _____

Address: _____

Secretary: Edward Weinhaus

1046 W. Kinzie St, Unit 301, Chicago, IL, 60642

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the 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.

13. Eric Gravengaard, Director

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

FILED
DEPT. OF STATE
JAN 10 PM 4:51
REC'D
JAN 10 2006

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ATHENA BITCOIN, 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 THIRTY-FIRST DAY OF DECEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATHENA BITCOIN, INC." WAS INCORPORATED ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2015.

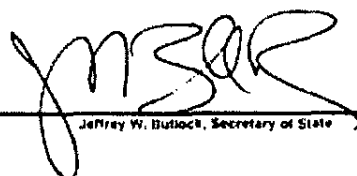
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SECRETARY
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SR# 20167228189

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203620540

Date: 12-31-16