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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	

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Y SULKER

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 551918 7716819

AUTHORIZATION : Synchible man

COST LIMIT : '\$ 70′.00

ORDER DATE: March 10, 2017

ORDER TIME : 3:44 PM

ORDER NO. : 551918-005

CUSTOMER NO: 7716819

FOREIGN FILINGS

NAME: TRUE COMMERCE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:	Registration Sec Division of Corp				
SHRI	True Com	nerce, Inc.			
50.00	<u></u>	Name of	corporation	- must include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence		of Good Stand	ling" and check are sul	act Business in Florida," bmitted to register the
	return all correspo Soukup	ondence concernin	g this matter	to the following:	
			Name of P	erson	
True C	ommerce, Inc.				
5600 V	V 83rd St, Suite 600	- 8200 Tower	Firm/Comp	any	
Bloom	ington, MN 55437		Addres	SS	
tasha.s	oukup@highjump.c		City/State an	d Zip code	
		E-mail address:	to be used fo	or future annual report	notification)
For fu	ther information o	oncerning this mat	ter, please ca	ill:	
Tasha Soukup		800 t (328-3271		
	Name of Person	a	Area Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	0.00 Filing Fee	S78.75 Filing Certificate of	Fee &	\$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.

(If name unav	ailable in Florida, enter alternate corporate name a	dopted for the purpose of transacting	business in Florida)	
Delaware 2.	3	25-1774791		
(State or cour 12/19/2011 4.	ntry under the law of which it is incorporated)	(FEI number, if applicable)		
	ate of incorporation)	(Date of duration, if other than perpetual)		
March 13, 20	17			
5600 W 83RD	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150 ST, Suite 600, 8200 Tower, Bloomington, MN 55	02, F.S., to determine penalty liability)	
/·	(Principa	al office address)		
	(0)	16 10 (100	·	
	reet address of Florida registered agent: (P.O Corporation Service Company	g address, if different) D. Box <u>NOT</u> acceptable)	7 HAR 10	
Name: Office Address:	1201 Hays Street			
	Tallahassee	32301 , Florida	20 (M) (C) (C)	
	(City)	(Zip code)	·	
	ngent's acceptance: nmed as registered agent and to accept servic tis application, I hereby accept the appointm	nent as registered agent and agree elative to the proper and complete	e to act in this capacity.	
designated in th further agree to	o comply with the provisions of all statutes re In familiar with and accept the obligations of	my position as registered agent.		
designated in th further agree to		, ,	Ielissa Zender	

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 Michael J. Cornell
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director: '
Address:
B. OFFICERS
Michael J. Cornell President:
90 South Cascade Avenue, Suite 1200 Address:
Colorado Springs, CO 80903
/ice President:
\ddress:
E. Flint Seaton Secretary:
90 South Cascade Avenue, Suite 1200, Colorado Springs, CO 80903 Address:
reasurer:
Address:
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.
3. E. Flint Seaton , Secretary
(Typed or printed name and capacity of person signing application)

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TRUE COMMERCE, 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 TENTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRUE COMMERCE, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 202177433

Date: 03-10-17

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