(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	= #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 702880 8142917					
AUTHORIZATION :					
COST LIMIT : \$ 70.00					
ORDER DATE : June 27, 2017					
ORDER TIME : 1:11 PM					
ORDER NO. : 702880-001					
CUSTOMER NO: 8142917					
FOREIGN FILINGS					
NAME: SMASHTEST, INC.					
XXXX QUALIFICATION (TYPE: CO)					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING					

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT# 62956

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Smashtest, Inc.				
Name of corporation - must include suffix				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporati "Certificate of Existence," or "Certificate of Goo above referenced foreign corporation to transact	ion for Authorization to Transact Business in Florida," od Standing" and check are submitted to register the business in Florida.			
Please return all correspondence concerning this	s matter to the following:			
Peter Tesler				
Na	ame of Person			
	m/Company			
2996 Mallory Circle, #12305				
	Address			
Kissimmee, FL, US, 34747				
· · · · · · · · · · · · · · · · · · ·	State and Zip code			
peter@smashtest.io	e used for future annual report notification)			
E-man address. (10 be	e used for future annual report nonfication)			
For further information concerning this matter, p	please call:			
Peter Tesler at (6 \ 596-6667			
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:				
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Statu				

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.

1. Smashtest, Inc.		" 600\ MINE # 400 PRO 1 PY	DV. II
"Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	,″ "COMPANY," "CORPORATIO	JN,"
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transact	ting business in Florida)
Delaware 2.	3		
	ry under the law of which it is incorporated)	(FEI number, if	applicable)
4 06-27-2017	5	Perpetual	
**	of incorporation)	(Duration: Year corp. will cease	to exist or "perpetual")
6			
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) 1502, F.S., to determine penalty liah	nility)
7 2996 Mallory Ci	ircle,#12305, Kissimmee,FL , 34747, US		
	(Principal office add	dress)	FR
2996 Mallory C	ircle, #12305, Kissimmee, FL, US, 34747		TAN Z
	(Current mailing add	dress)	SS S
			30 SEE
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	79 🕏 🖪
Name:	Corporation Service Company		20 cm
T (ULLIO)	1201 Hays Street	A+- ===	5
Office Address:			-
	Tallahassee	32301 , Florida	
	(City)	(Zip code)	
	ent's acceptance:		
	ned as registered agent and to accept servers application, I hereby accept the appoint		
further agree to c	comply with the provisions of all statutes familiar with and accept the obligations	relative to the proper and comp	lete performance of my
	Corporation Service Company	.,, <u>Farmon an Francis an al</u>	Melissa Zender
	74.4	7	Asst. Vice Presiden
	By: //	coll	Asst. vice Presiden
	(Registered agent's 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 Peter Tesler Chairman: 2996 Mallory Circle #12305 Address: Kissimmee, FL 34747 Vice Chairman: Address: ___ Address: __ **B. OFFICERS** Peter Tesler President: 2996 Mallory Circle #12305 Address: Kissimmee, FL 34747 Vice President: ___ Address: __ Secretary: _ Address: ___ Treasurer: __ NOTE: If necessary, you may at ach 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. Peter Tesler (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 "SMASHTEST, 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 TWENTY-NINTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SMASHTEST, INC."

WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF JUNE, A.D. 2017.

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

6457873 8300

SR# 20175028422

Authentication: 202808173

Date: 06-29-17