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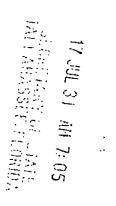
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: botkeeper Inc.		
SUBJECT: botkeeper Inc. 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:		
Enrico Palmerino Name of Person		
Name of Person		
botkeener		
Firm/Company		
Firm/Company 745 Atlantic Ave Address		
Address		
City/State and Zip code Megabot Photheeper. com E-mail address: (to be used for future annual report notification)		
City/State and Zip code		
megabot @ botkeeper. com		
E-mail address: (No be used for future annual report notification)		
For further information concerning this matter, please call:		
Enryo Palmerino at (50f) 6/2 5273 Name of Person Area Code Daytime Telephone Number		
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 \$\Bigcup \\$78.75 Filing Fee & Braining Fee & Service Certificate of Status Certified Copy 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. BOTKERPET INC.

(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) 2. <u>Nelaware</u> USA (State or country under the law of which it is incorporated) 3. <u>47 464 569 (FEI number, if applicable)</u> $\frac{7/27/15}{\text{(Date of incorporation)}}$ 5. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability) Atlantie Ave Boston MA 02111
(Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: $\frac{\int da_{2} f_{2} + i \delta \Delta}{\text{(City)}}, \text{ Florida} \frac{33324}{\text{(Zip code)}}$ 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. (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: Enrico Palme-ino	.
Address: 745 Atlante Ave	
BOIM MA 02111	
Vice Chairman: Enno Palmenno	
Address: 745 Atlan 2 Ave	
Bosom MA DEIII	
Director: Enrico Palmerino	
Address: 745 Atton A Ave	
Boston MA ozili	
Director:	
Address:	<u> </u>
B. OFFICERS	SS
President: Enrico Palmerino	
Address: 745 Atlantic Ave	100 100 100 100 100 100 100 100 100 100
BOSTON MA OZIII	05
Vice President: FANCO Palmerino	
Address: 745 Atlan M2 And	
BOSTUM MA 22111	
\sim 01	
Address: 745 Atlante Are, Boson MA 22111	
Treasurer: EARILO Palmerino	
Address: 745 Atlanti Are Burn MA 02111	
NOTE: If necessary, you may attach an addengum to the application listing additional of	ficers and/or directors.
12.	
Signature of Director or Officer	and the Ade Control of the Control o
The officer or director signing this document (and who is listed in number 11 above) affirm are true and that he or she is aware that false information submitted in a document to the E a third degree felony as provided for in s,817.155, F.S.	
B. Fuciso Palmento	

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

Page 1



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

DELAWARE, DO HEREBY CERTIFY "BOTKEEPER 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-FOURTH DAY OF JULY, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 202939030

Date: 07-24-17