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Division of Corporations

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Fax Number : (850)617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC. Account Number : 120080000045

Phone : (382)645-7488 Fax Number : (382)645-1258

Enter the email address for this business entity to be used for future annual report mailings, toter only one email address please.

Emil Address: tcoffin@simplyreliable.com

FOREIGN PROFIT/NONPROFIT CORPORATION SIMPLY RELIABLE, INC.

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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.

(Enter name of c	orporation; must include "INCORPORATED," "	COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	orp." "Inc," "Co," or "Corp.")		
(If name unavail	able in Florida, enter alternate corporate name ado	opted for the purpose of transacting h	usiness in Florida)
Delaware			
	y under the law of which it is incorporated)	(FEI number, it applicable)	
08/30/2012			
(Date	of incorporation) 5	: Date of duration, if other tha	in perpetual)
			• • •
	(Date first transacted business in F	dorida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502	, F.S., to determine penalty liability)	
	ing Jr S; N APT 1414		, <u>4</u>
(Principal office address)		CVC 11 ·	
	•	office address)	: 🍱
St. Petersburg, F	L 33716	·	i A
St. Petersburg, F	L 33716	office address)	MAR 15
	L 33716 (Current mailing a	address? if different)	\mathcal{L}_{n}
	(Current mailing a cet address of Florida registered agent: (P.O. E	address? if different)	2
	L 33716 (Current mailing a	address? if different)	AH 9: 4
. Name and <u>stre</u> Name:	L 33716 (Current mailing a et address of Florida registered agent: (P.O. E Thomas C Coffin 10401 Dr. ML King Jr St N APT 1414	address? if different)	2
. Name and stree	Current mailing a et address of Florida registered agent: (P.O. F Thomas C Coffin 10401 Dr. ML King Jr St N APT 1414 St. Petersburg	ddress; if different) Box NOT acceptable)	AH .9: 4
. Name and <u>stre</u> Name:	Current mailing a et address of Florida registered agent: (P.O. E Thomas C Coffin 10401 Dr. ML King Jr St N APT 1414	ddress; if different) Box NOT acceptable)	AH .9: 4

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.

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11. Nam	es and business addresses of officers and/or directors:	·				
A. DIRE	ECTORS					
Chairman	Jonathan Knapp					
Address:	34 Jantison Way, Plymouth, MA 02360					
Vice Chai	rman:					
Address:						
Director:	Thomas C Coffin					
	1040) Dr. Ml. King Jr St N, APT 1414, St. Petersburg, FL 33716	i .				
Director:	John Carten					
	1810 Platte Street, Denver, CO 80202		- 1 - 2 -			
B. OFF	ICERS Thomas C Ceffin		70 PD S S S S S S S S S S S S S S S S S S			
	10401 Dr. ML King Jr St N, APT 1414, St. Petersburg, FL 33716	5 · · · · · · · · · · · · · · · · · · ·				
	ident:					
Address:						
Secretary:	Chris Jaile					
Address:						
Treasurer	Chris Jaffe 1212 Laurel Street, #712, Nashville, TN 37203					
	If necessary, you may attach an addendum to the application	_				
The office are true a third do	Signature of Director or the or or director signing this document (and who is listed in mund that he or she is aware that false information submitted begree felony as provided for in s.817.155, F.S. mas C Coffin, CEO/President (Typed or printed name and capacity of personnel or capacity or capacity or capacity of personnel or capacity or	umber 11 above) affirms that in a document to the Departm	the facts stated herein ent of State constitutes			
	Andread and house many and	- 	(((H18000084985 3)))			

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11. Names and ibusiness addresses of officers and/or directors: (Add tional List):

A. DIRECTORS

Director:

Chris Jaffe

Address:

1212 Laurel Street, #712, Nashville, TN 37203

Director

Anne Devlin

Audress:

11150 4th St N, APT 3813, St. Petersburg, FL 33716

B. OFFICERS

Chief Visionary:

Jonathan Knapp

Address:

34 Jamison Way, Plymouth, MA 02360

CEO:

Thomas C Coffin

Address

10401 Dr. ML King Jr St N, APT 1414,3st. Petersburg, FL 33716

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIMPLY RELIABLE, 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 FIFTEENTH DAY OF MARCH, A.D. 2018.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIMPLY RELIABLE, INC." WAS INCORPORATED ON THE THIRTIETH DAY OF AUGUST, A.D. 2012.

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

1.5

5205368 8300 5R# 20181952515

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

Authentication: 202329868

Date: 03-15-18

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