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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 21, 2018

JOSEPH BUTZER 600 JULIAN LN SUITE 650 ARDEN, NC 28704

SUBJECT: TILTWORKS, INC Ref. Number: W18000023226

We have received your document for TILTWORKS, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 218A00004828

RECEIVED
APR 0 2 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TI + Works 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: Jaseph Butzer
Name of Person T. Itwovks Inc. Firm/Company
600 Julian Lane, Suite 650 Address
Arden, NC 28704
City/State and Zip code J but 2 ev et 1 tuov KS. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
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 Certificate of Status □ \$78.75 Filing Fee & Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	CE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO DREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
1	TI HWOYKS, Inc. corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "(Corp," "Inc," "Co," or "Corp.")	
	ilable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	
2. North	try under the law of which it is incorporated) 3. 59-3683737 (FEI number, if applicable)	
4. <u>June</u>		
(Dat	te of incorporation) (Date of duration, if other than perpetual)	
6	(Date first transacted business in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
7. 600	Julian Lone, Suite 650 Arden, WC 28704 (Principal office address)	
· · · · · · · · · · · · · · · · · · ·	(Principal office address)	
	(Current mailing address, if different)	
R. Name and stre	eet address of Florida registered agent: (P.O. Box NOT acceptable)	
· ·	Stefau Wild	- 3° 3
Name:	STEFAL WILL	
Office Address:	7001 S Gator Creek Blvd	·, *=.
	Savasota , Florida 34241 (City) (Zip code)	
	(City) (Zip code)	
9. Registered as	gent's acceptance:	
Having been nat	med as registered agent and to accept service of process for the above stated corporation at the place is application, I hereby accept the appointment as registered agent and agree to act in this capacity.	e 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.	
	Stela 1. La	
-	(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: _ Address: Vice Chairman: Address: Director: Address: Director: Address: _ **B. OFFICERS** CEO 650 Address: Secretary: Address: Address: NOTE: If pecessary, 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

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

a third degree felony as provided for in s.817.155, F.S.



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

TILTWORKS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 24th day of June, 2010, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

Certification# 102204517-1 Reference# 14395211- Page: 1 of 1 Verify this certificate online at http://www.sosne.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 30th day of March, 2018.

Elaine J. Marshall

Secretary of State