F18000001700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

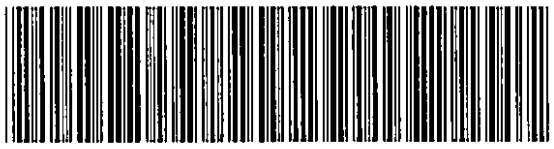
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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18 APR 10 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O SIMMONS
APR 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PINPT, 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:

Sean Driscoll, Project Assistant
Name of Person

Nelson Mullins Riley & Scarborough LLP
Firm/Company

201 17th Street NW, Suite 1700, Atlanta, GA 30363
Address

Atlanta, Georgia, 30363
City/State and Zip code

jhaynie@pinpt.co
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sean Driscoll at (404) 322-6178
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
- ☐ $78.75 Filing Fee & Certificate of Status
- ■ $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.

1. PINPT, 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. Delaware
(State or country under the law of which it is incorporated)

3. 82-1404560
(FEI number, if applicable)

4. April 7, 2017
(Date of incorporation)

5. _____
(Date of duration, if other than perpetual)

6. Upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2704 Fairbrook Drive, Mountain View, CA 94040
(Principal office address)

_____
(Current mailing address, if different)

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APR 10 PM 3:57

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Dr., Suite A

Tallahassee, Florida 32301
(City) (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.

Jaclyn Wright, Asst. Secretary
(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: Jeffrey G. Haynie

Address: 2704 Fairbrook Drive, Mountain View, CA 94040

_____

Director: Nolan W. Wright, III

Address: 2704 Fairbrook Drive, Mountain View, CA 94040

_____

B. OFFICERS

President: Jeffrey G. Haynie

Address: 2704 Fairbrook Drive, Mountain View, CA 94040

_____

Vice President: _____

Address: _____

_____

Secretary: Nolan W. Wright, III

Address: 2704 Fairbrook Drive, Mountain View, CA 94040

Treasurer: Nolan W. Wright, III

Address: 2704 Fairbrook Drive, Mountain View, CA 94040

NOTE: If necessary, 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 a third degree felony as provided for in s.817.155, F.S.

13. Jeffrey G. Haynie, President and Chief Executive Officer
(Typed or printed name and capacity of person signing application)

Delaware

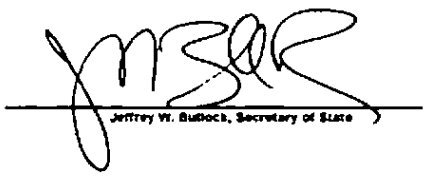
The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PINPT, 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 SIXTH DAY OF APRIL, 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 "PINPT, INC." WAS INCORPORATED ON THE SEVENTH DAY OF APRIL, A.D. 2017.

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



6372731 8300

SR# 20182504567

Authentication: 202468624

Date: 04-06-18

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

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2018

KRIS HOLM
1659 HIGH BLUFF RD
GRAFTON, WI 53024

SUBJECT: HAMLET & SMITH, INC.
Ref. Number: W18000034243

We have received your document for HAMLET & SMITH, INC. and your check(s) totaling $70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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

Octavia L Simmons
Regulatory Specialist III

Letter Number: 018A00007355