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18 MAY 31 PM 2: 06

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 170040 7868112 AUTHORIZATION : COST LIMIT : ORDER DATE : April 18, 2018 ORDER TIME : 10:45 AM ORDER NO. : 170040-055 CUSTOMER NO: 7868112 FOREIGN FILINGS NAME: G-WALLET CORP XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY \_\_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

## **COVER LETTER**

TO:	Registration Section					
	Division of Corpor					
SHRI	G-Wallet Cor	P				
00170		Name of o	corporation	- must include suffix		
Dear S	Sir or Madam:					
"Certi		or "Certificate of	Good Stan	ding" and check are sul	act Business in Florida," bmitted to register the	
	-				51 52	
Please Daniel	return all correspond Chavez	lence concerning	to the following:		1	
			Name of I	Person	: 0)	
109 N	. Post Oak Ln, Suite 43	ড় গু	<u> </u>			
Housto	on, TX 77024		Addre	SS	_, <u>.</u> ,	
daniel.	.chavez@emergenttech		City/State ar	d Zip code		<del></del>
		E-mail address: (	to be used for	or future annual report	notification)	
For fu	rther information cor	cerning this matt	er, please c	ıll:		
Daniel Chavez		713	239-2710			
	Name of Person	at	Area Code	Daytime Telep	bhone 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			
Enclos	sed is a check for the	following amour	nt:			
□ \$70	0.00 Filing Fee 💢 🖸	\$78.75 Filing F Certificate of S		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of State Certified Copy	us &

## 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. G-Wallet Corp 1. (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) 820677800 (FEI number, if applicable) (State or country under the law of which it is incorporated) 02/17/2017 (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2445 Augustine Dr. Suite 460 Santa Clara. CA 95054 (Principal office address) 109 N Post Oak Lane, Suite 435, Houston, Texas 77024 വ (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) 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. Roxanne Turner Asst. Vice President By:

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	Brent William de Jong	•••		
	109 N. Post Oak Ln, Suite 435			
Address:	TY			<del>-</del>
Vice Chai	rman:			
Address:				
•	Brent William de Jong			
Director:				
	2338 W. Royal Palm Road, Suite J			
Address:				
Director:			35.IU	
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Addresst			:	
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B. OFF		-	$\Rightarrow$	
	Brent William de Jong		Ġ.	
President:	109 N. Post Oak Ln. Suite 435	<u> </u>	<u> </u>	<del></del>
Address	TO A TOST VAR BIT. SUITE 45.	•		
rudicos.				
Vice Pres	ident:			
Address				
	<del></del>		· ·	
	Brent William de Jong			
Secretary:	109 N. Post Oak Ln, Suite 435. Houston, TX 77024			
Address:				
	Brent William de Jong			
Treasurer	: 109 N. Post Oak Ln, Suite 435, Houston, TX 77024			
Address:				
NOTE:	If necessary, you may attach an addendum to the application listing ad-	ditional officers and	/or direct	ors
	<i>a)</i>	annound the contract of the co		
12				
	Signature of Director or Officer			
	eer or director signing this document (and who is listed in number 11 al			
	and that he or she is aware that false information submitted in a docume	ent to the Departmen	it of State	constitutes
	egree felony as provided for in s.817.155, F.S. and de Jong, President			
	and configuration			
	(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 "G-WALLET CORP" 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 MAY, 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 "G-WALLET CORP"

WAS INCORPORATED ON THE SEVENTEENTH DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE

BEEN PAID TO DATE.

Authentication: 202776200

Date: 05-29-18

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