M001/005

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

: INCORP SERVICES INC Account Name

Account Number : I20120000007 : (702) 366-2500 Phone

: (702)866-2689 Fax Number

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

8

FOREIGN PROFIT/NONPROFIT CORPORATION Bettercloud, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	9 05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

	TO:	Registration Sec Division of Cor					
	erin (•	Bette	ercloud, Inc.		
	SUBJ	CC1:	Name of o	orporation -	must include suffix		
	Dear S	ir or Madam:					
	The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Flori "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:						
		Jennifer Sharp					
	Name of Person InCorp Services, Inc. Firm/Company 3773 Howard Hughes Pkwy Suite 500S Address						
				egas, NV 8 ———			
		City/State and Zip code					
		documents@Incorp.com E-inail address: (to be used for future annual report notification)					
	For further information concerning this matter, please call:						
Jennifer	Sharp on bohalf of InCorp Services, Inc. at (C	(800) 246-2677		
		Name of Perso		Area Code	Daytime Telep	hone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				MAILING A Registration S Division of Co P.O. Box 632 Tallahassec, F	ection orporations 7	
	Enclos	ed is a check for	the following amou	ıt:			
	\$ 70	0.00 Filing Fee	□ \$78.75 Piling F Certificate of		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

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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.

Bettercloud, inc		"(O) (D LYN I HOODBOR ATION "	
(Enter name of co	poration; must include "INCORPORATED," rp," "luc," "Co," or "Corp.")	"COMPANY," "CORPORATION,	
Delaware	ble in Florida, enter ulternate corporate name a	adopted for the purpose of transacting busing	
	under the law of which it is incorporated)	Perpetual	(0)
08/15/2016 (Date	of incorporation) 5.	(Date of duration, if other than p	erpetual)
Upon Filing			
	(SEE SECTIONS 607.1501 & 607.1.	n Florida, if prior to registration) 502, P.S., to determine penalty liability)	2018 ANG SECRETA
330 7th Ave,	14th Floor, New York, NY 10001		
	(Princi	pal office address)	23 ASSE
	(Current maili	ng address, if different)	E OF S
3. Name and stree	t address of Florida registered agent: (P. InCorp Services, Inc.	O. Box <u>NOT</u> acceptable)	6: 02 3: 02
Office Address:	17888 67th Court North		
~	Loxahatchee	33470	
	(Clty)	(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.

Jennifer Sharp on behalf of Incorp Services, Inc.

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. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: ____ Address: __ Director: _ Address: ___ Director: R. OFFICERS David Politis, CEO President: 330 7th Ave, 14th Floor, New York, NY 10001 Address: Vice President: Address: _ Secretary: __ Address: __ Bart Hacking, CFO 330 7th Ave, 14th Floor, New York, NY 10001 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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 heroin 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. David Politis, Chief Executive Officer (Typed or printed name and capacity of person signing application)

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<u>Delaware</u>

Page 1

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

DELAWARE, DO HEREBY CERTIFY "BETTERCLOUD, 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-THIRD DAY OF AUGUST, A.D.

2018.

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

AND I DO HEREBY SURTHER CERTIFY THAT THE SAID "BETTERCLOUD, INC." WAS INCORPORATED ON THE FIFTH DAY OF APRIL, A.D. 2012.

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

5136332 8300 SR# 20186316877

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

Authentication: 203298415

Date: 08-23-18