

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (514)280-3338
Fax Number : (954)208-0845

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

Outbox Systems, Inc.

FOREIGN PROFIT/NONPROFIT CORPORATION

Outbox Systems, Inc.

STATE OF FLORIDA
• HASSELT, FLORENCE

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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.*

1. Ourbox Systems, 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 3. 47-2080218

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. 09/12/2014 5. Perpetual

(Date of incorporation)

(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. 9350 S 150 E, Suite 220, Sandy, UT 84070

(Principal office address)

Name

(Current mailing address, if different)

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation , Florida 33324
(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.

By: Ternell Kearney Ternell Kearney Assistant 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.

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DIVISION
WASSELL, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Travis Johnson

Address: 9350 S 150 E, Suite 220

Sandy, UT 84070

Director: Kent Madsen

Address: 9350 S 150 E, Suite 220

Sandy, UT 84070

B. OFFICERS *SEE ATTACHMENT*

President: _____

Address: _____

Vice President: _____

Address: _____

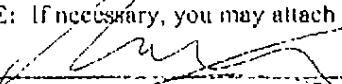
Secretary: Ryan Westwood

Address: 9350 S 150 E, Suite 220, Sandy, UT 84070

Treasurer: Paul Fletcher

Address: 9350 S 150 E, Suite 220, Sandy, UT 84070

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. Isaac Westwood, President

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

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**Attachment to Florida
Officers & Directors**

1 Full Name:	Ryan Westwood
Officer/Director:	Officer,Director
Officer's Title:	Chief Executive Officer
Director's Title:	Director
Business Address:	9350 S 150 E, STE 220
City:	SANDY
State:	UT
ZIP Code:	84070
2 Full Name:	Isaac Westwood
Officer/Director:	Officer,Director
Officer's Title:	Chlef Operating Officer
Director's Title:	Director
Business Address:	9350 S 150 E, Suite 220
City:	Sandy
State:	UT
ZIP Code:	84070

Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OUTBOX SYSTEMS, 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-FIRST DAY OF NOVEMBER, 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 "OUTBOX SYSTEMS, INC." WAS INCORPORATED ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2014.

JEFFREY W. BULLOCK,
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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A handwritten signature of Jeffrey W. Bullock in black ink, followed by a horizontal line and the text "Jeffrey W. Bullock, Secretary of State".

Authentication: 203947417

Date: 11-21-18