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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2019 AUG 19 PM 4:23

B KINSEY
AUG 22 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: E-SPIRIT 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:

Christoph Knorrenschild

Name of Person

AugustinPartners LLC

Firm/Company

300 E 42nd St, 14FL

Address

New York, NY 10017

City/State and Zip code

cknorrenschild@augustinpartners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christoph Knorrenschild

917

472 5006

at (_____) _____

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.*

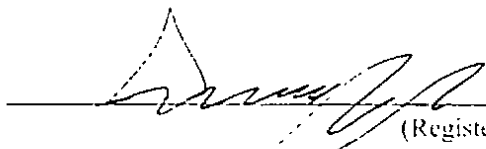
1. E-Spirit Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 99-0367716
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 07/15/2011 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. 8/1/2019
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. One Cranberry Hill, Suite 100, Lexington, MA 02421, USA
(Principal office address)
- c/o AP LLC, 300 E 42nd St, 14FL, New York, NY 10017
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Greg Rice
- Office Address: 5944 Bay Drive South
- Gulfport, Florida 33707
(City) (Zip code)

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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.


(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: Joern Bodemann

Address: One Cranberry Hill, Suite 100, Lexington, MA 02421, USA

Vice Chairman: Andreas Knorr

Address: One Cranberry Hill, Suite 100, Lexington, MA 02421, USA

Director:

Address:

Director:

Address:

B. OFFICERS

President: Joern Bodemann

Address: One Cranberry Hill, Suite 100, Lexington, MA 02421, USA

Vice President: Andreas Knorr

Address: One Cranberry Hill, Suite 100, Lexington, MA 02421, USA

Secretary:

Address:

Treasurer:

Address:

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. Andreas Knorr, COO and Vice President


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

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "E-SPIRIT 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 SEVENTH DAY OF AUGUST, A.D. 2019.



Jeffrey W. Bullock, Secretary of State

5011630 8300

SR# 20196247151

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

Authentication: 203369056

Date: 08-07-19