(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL.		
(Business Entity Name)				
(DC	ocument Number)			
Certified Copies	_ Certificates	of Status		
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NAME:

MYSTERY TACKLE BOX, INC.

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:	Registration Se						
	Division of Cor	=					
CHRI	Mystery ' JECT:	Tackle Box, Inc.					
SUB	EC1	Name of	corporation	- must include s	uffix	-	
Dear S	Sir or Madam:						
"Certi	ficate of Existence		Good Star	ding" and check		ct Business in Florida," omitted to register the	77
	e return all corresp la Moreno, Paralega	oondence concerning	this matter	to the following	z :	-5 P	F
		 -	Name of				ーロ
McDo	nald Hopkins LLC		Name of	rerson		PM 4: 30 SEE. ILORID	
			Firm/Com	pany			_
600 S	uperior Avenue E.,	Suite 2100					
-			Addre	ess			
Cleve	land, OH 44114						
			City/State a	nd Zip code			
terilyr	i.eisenhauer@catch	co.com					
	·	E-mail address: (to be used t	or future annual	report	notification)	
For fu	rther information	concerning this mat	er, please o	eall:			
Monica Moreno		216	348-5406	348-5406			
	Name of Perso	at n	Area Cod	e Daytim	e Telep	hone Number	
	Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	porations g Center Circle . 32301		Regist Divisi P.O. E	ration S on of Co Box 632	orporations	
Enclo	sed is a check for	the following amour	ıt:				
□ \$7	0.00 Filing Fee	S78.75 Filing F Certificate of S		\$78.75 Filing Certified Copy		\$87.50 Filing Fee Certificate of Sta 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. Mystery Tackle Box, Inc. l. (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) 45-5292487 (State or country under the law of which it is incorporated) (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) 549 W. Randolph Street, Suite 101, Chicago, IL 60661 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agent Solutions, Inc. Name: 155 Office Plaza Drive, Suite A Office Address: Tallahassee

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.

Molly McWard, 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 See Attachment. Chairman: Address: _ Vice Chairman: Address: Director: _ Address: ___ Address: **B. OFFICERS** See Attachment. President: Vice President: Address: ___ Secretary: ___ Address: __ Treasurer: Address: ____ 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 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. Tim MacGuidwin, Secretary 13.

ATTACHMENT TO APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

MYSTERY TACKLE BOX, INC.

Names and business addresses of the officers and directors:

Name and Address	<u>Title</u> Director, Chief Executive Officer and President
Ross Gordon 549 W. Randolph Street, Suite 101 Chicago, IL 60661	2019 NO SECNE TALLAI
Tim MacGuidwin 549 W. Randolph Street, Suite 101 Chicago, IL 60661	Director, Chief Operating Officer, Chief Strategy Officer and Secretary
Rick Desai / 549 W. Randolph Street, Suite 101 Chicago, IL 60661	Director Director Director
Iain Shovlin 549 W. Randolph Street, Suite 101 Chicago, IL 60661	Director
Evan Maridou √ 549 W. Randolph Street, Suite 101 Chicago, IL 60661	Director
Ryan McDonnell 549 W. Randolph Street, Suite 101 Chicago, IL 60661	Chief Technology Officer

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MYSTERY TACKLE BOX, 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 FIFTH DAY OF NOVEMBER, A.C. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MYSTERY TACKLEBOX, INC." WAS INCORPORATED ON THE SECOND DAY OF NOVEMBER, ADD.

2015.

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

Authentication: 203934017

Date: 11-05-19