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COVER LETTER

Division of Corporations	
SUBJECT: Hempsmart Global, Inc.	
	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation 6 "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	tanding" and check are submitted to register the
Please return all correspondence concerning this ma	tter to the following:
Alan Hawkins	
Name	of Person
Independent Law PLLC	
Firm/C	ompany
2106 NW 4TH PL	
	ldress
Gainesville, FL 32603	
	e and Zip code
ahawkins@independent.law	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
Alan T. Hawkins at (352) 353-4048
Name of Person Area C	ode Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTME \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	NT OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy 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. Hempsmart Glo	bal, Inc.		
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name ac	lopted for the purpose of transacting b	ousiness in Florida)
2. Nevada	3. 9	36-1426593	
(State or countr	y under the law of which it is incorporated)	(FEI number, if appli	cable)
4. 01/11/2021	5		
(Date	e of incorporation)	(Date of duration, if other tha	n perpetual)
6	(0.6.5.4	P1 '1 'C '	
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		
7.			
		e street address)	<u> </u>
1340 West Valle	y Parkway, Suite 205, Escondido, CA 92029		
	<u> </u>	address, if different)	
		,	
8. Name and street	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
			•
Name:	Independent Law PLLC		·
Office Address:	2106 NW 4th Pl		
			• :
	Gainesville	, Florida <u>32603</u> _	•
	(City)	(Zip code)	.
9. Registered ag	ont's accentance.		
	ent's acceptance. Ted as registered agent and to accept service	e of process for the above stated c	ornoration at the place
	application, I hereby accept the appointme		
**	omply with the provisions of all statutes rei		
	with and accept the obligations of my posi		
	Mar Land	/ _	
-	(Parietand appets sin	nutura)	_
	(Registered agent's sig	nature)	

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.

A. DIRECTORS Name: Jesus Quintero ■Chairman □ Chairman Uvice Chairman Address: 1340 West Valley Parkway ☐ Vice Chairman Address: _____ Suite 205 **■** Director Director President Escondido, CA 92029 □ President ☐ Vice President □ Vice President Treasurer □Treasurer ☐ Secretary ☐ Secretary Other ____ ☐ Other _____ □Other _____ Other _____ Name: Alan T. Hawkins □Chairman □ Chairman Name: ______ □Vice Chairman Address: 2106 NW 4th Pl ☐ Vice Chairman Address: Gainesville, FL_32603 Director □ Director ☐ President □President □Vice President ☐ Vice President ■ Secretary ☐ Treasurer □ Secretary ☐ Treasurer □Other _____ Other _____ □Other _____ □Other _____ □Chairman Name: _____ □ Chairman Name: □Vice Chairman Address: ☐ Vice Chairman Address: □ Director □ Director President □ President □Vice President _____ ☐ Vice President ☐ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer □Other _____ []Other____ Other □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when fifing your Florida Department of State Annual Report form. Signature of Director or Officer she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in

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 s.817.155, F.S.

13. Alan T. Hawkins, Corporate Secretary

HE STATI

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada standing Revised Statutes which are either presently in a status of good standing or were in good for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **Hempsmart Global, Inc.**, as a DOMESTIC CORPORATION (78) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 01/11/2021, and is in good standing in this state.

I further certify that the above DOMESTIC CORPORATION (78) has its formation document and no amendments on file in this office as of the date of this certificate.

Certificate Number: B202101121345398

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 01/12/2021.

BARBARA K. CEGAVSKE Secretary of State

SECRETARY OF STATE STATE OF NEVADA

OFFICE OF T
SECRETARY OF

	APOS	TILLE	,	
	(Convention de La Ha	ye du 5 October 1961)		
1. Country: Pays/Pals:	UNITED STATES OF AMERICA			
This public document Le present acte public / El present document	nento publico			
2. has been signed by: a ete signe par ha sido firmado po	BARBARA K. CEGAVSKE			
3. acting in the capacity of agissant an qualite de quien actua en calidad de	SECRETARY OF STATE			
4. bears the seal/stamp of est revetu du sceau / timbre de y esta revestido del sello / timbre de	THE STATE OF NEVADA			
	CERT	IFIED		
	Atteste / C	Pertificado		
5. at a / en	Carson City, Nevada, U.S.A			
6. the le / el dia	TWELFTH DAY OF JANUARY, 2021			
7. by par / por	Barbara K.Cegavske, Secretary of State, State of Nevada, U.S.A			
8. Number sous no bajo el numero	C202101121345400			
9 Seal/Stamp: Sceau / timbre: Sello / timbre:		10. Signature: Signature: Firma:	BARBARA K. CEGAVSKE Nevada Secretary of State	

This Apostille only certifies the authenticity of the signature and the capacity of the person who has signed the public document, and, where appropriate, the identity of the seal or stamp which the public document bears.

This Apostille does not certify the content of the document for which it was issued.

This Apostille is not valid for use anywhere within United States of America, its territories or possessions.

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Cette Apostille ne certifie pas le contenu de l'acte pour lequal elle a été émise.

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Esta Apostilla no certifica el contenido del documento para el cual se expidio.

No es valido el uso de esta Apostilla en los Estados Unidos de America, sus territorios o posesiones.

SECRETARY OF STATE



DOMESTIC CORPORATION (78) CHARTER

I, BARBARA K. CEGAVSKE, the duly qualified and elected Nevada Secretary of State, do hereby certify that **Hempsmart Global, Inc.** did, on 01/11/2021, file in this office the original—that said document is now on file and of record in the office of the Secretary of State of the State of Nevada, and further, that said document contains all the provisions required by the law of the State of Nevada.



Certificate Number: B202101121345399

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 01/12/2021.

BARBARA K. CEGAVSKE Secretary of State

Borbora K. Cegarste