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COVER LETTER

TO:		tration Section ion of Corporation (Corporation)						
SUBJE	ECT:	Hopthru, Inc.						
00202			Name of	corporation	- must	include suffix		
Dear Si	r or M	adam:						
"Certifi	cate of	f Existence," (Good Star	iding'' ai	nd check are sub	ct Business in Fl emitted to registe	
Please r	return a	all correspond	lence concerning	this matter	to the f	ollowing:		
Cole Ca	alhoun							
	1			Name of	Person			
Hopthru	ı, Inc.							. 1
	_		1.11	Firm/Con	pany			
677 Arg	juello E	Blvd. #108						ľ
				Addr	ess			
San Fra	ancisco	o, CA 94118						
			(City/State a	nd Zip o	ode	-	البين
cole@h	opthru	.com						=::\
		1	E-mail address: (to be used:	for futur	e annual report i	notification)	· ,
For furt	her int	ormation con	cerning this mat	ter, please o	all:			
Cole Ca	alhoun		at	(425	802-8313			
	Name	e of Person		Area Cod	c	Daytime Telep	hone Number	
	Regis Divisi The C 2415	tration Section ion of Corpora centre of Talla	ations hassee reet, Suite 810			MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7	
	iake ch	eck payable to:	following amour FLORIDA DEP \$78.75 Filing I Certificate of S	ARTMENT	3 \$78.75	ATE 5 Filing Fee & ied Copy	S87.50 Fil Certificate Certified (of Status &

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.

(Enter name of o	orporation; must include "INCORPORATED," "C	OMPANY," "CORPORATION,"	
	orp," "Inc," "Co," or "Corp.")		
			-3
			,. <u></u>
(If name unavail	able in Florida, enter alternate corporate name adop	ted for the purpose of transacting business in F	lorida)
Delaware	3		1, —————
(State or count	y under the law of which it is incorporated)	(FEI number, if applicable)	
07/01/2016	5.	(Date of duration, if other than perpetual)	
(Date	of incorporation)	(Date of duration, if other than perpetual)	
N/A			
	(Date first transacted business in Flor (SEE SECTIONS 607.1501 & 607.1502, I		
677 Arguello Bl	d. #108 San Francisco, CA 94118		
	(Principal office st	reet address)	1.
	(Current mailing add	dress, if different)	1
Name and stre	et address of Florida registered agent: (P.O. Bo	ox NOT acceptable)	
Name:	Registered Agents Inc.		
rianic.	7901 4th St N, STE 300	•	/;
		_	. 1
ffice Address:			- 1
ffice Address:	St. Petersburg	, Florida 33702 (Zip code)	- (

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	•						
□Chairman	Cole Calhoun Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director	San Francisco, CA 94118	Director					
President		□President					
□Vice President		□Vice President					
■Secretary	Treasurer	☐ Secretary		☐Treasurer			
□Other	Other	Other		□Other			
□Chairman □Vice Chairman	Daniel Radding Name: 2450 Otis Drive Address: Alameda, CA 94501	□Chairman □Vice Chairman		·			
■ Director	Marieda, Gri 34301	□Director					
□President		□President		····			
☐ Vice President		□Vice President					
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer			
□Other	Other	Other		Other			
□ Chairman	Name: Abe Yokell 101 Mission Street, Suite 805	□Chairman	Name:	.\			
□Vice Chairman	Address:	□Vice Chairman	Address:				
■ Director	San Francisco, CA 94105	Director					
□President		President		···			
□Vice President		□Vice President					
☐ Secretary	☐ Treasurer	□Secretary		□Treasurer			
Other	Other	Other		Other			
	Use an attachment to report more than six (6). The attachment to report more than six (6). The attachment to the index when filing your Florida Department.	ent of State Annual Re	eport form.	poses only. Non-indexed			
	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. Cole Calhoun



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

DELAWARE, DO HEREBY CERTIFY "HOPTHRU, 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 FIFTEENTH DAY OF FEBRUARY, A.D. 2021.

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

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



Authentication: 202510357

Date: 02-15-21