## 1986

	(Requestor's Name)					
	(Address)					
	(Address)					
;	(Address)					
<u>.</u> !	(City/State/Zip/Phone #)					
:	PICK-UP WAIT MAIL					
<u>I</u> 1	(Business Entity Name)					
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
	Office Use Only					



300361825143

2021 APR 12 AM 8: 54

1PR 1 2 202° . Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 753120 8318372

AUTHORIZATION : Spell Class

COST LIMIT : (\$ `7.0'.00

ORDER DATE: April 12, 2021

ORDER TIME : 9:51 AM

ORDER NO. : 753120-005

CUSTOMER NO: 8318372

#### FOREIGN FILINGS

NAME: USCUTTER INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

#### **COVER LETTER**

FO: Registration Section Division of Corporations					
SUBJECT: Uscutter Inc.					
	corporation -	must include suffix			
Dear Sir or Madam:					
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to tra	f Good Standi	uthorization to Transact Business in Florida," ng" and check are submitted to register the in Florida.			
Please return all correspondence concerning	g this matter to	o the following:			
Bonnie S. Cortese					
	Name of Pe	erson			
US Cutter Inc.					
-	Firm/Comp	any			
5800 Campus Circle Dr. E, Suite 150B					
	Addres	S			
Irving, TX 75063					
	City/State and	1 Zip code			
bcortese@insideplastics.com					
E-mail address:	(to be used for	r future annual report notification)			
For further information concerning this ma	tter, please cal	il:			
Bonnie S. Cortese	onnie S. Cortese at ( 299-7041				
Name of Person	Area Code	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 DE \$70.00 Filing Fee \$78.75 Filing Certificate of	Fee &	DF STATE \$78.75 Filing Fee &			

### 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. Uscutter Inc.								
	orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	,					
(If name unavail	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)							
2. Delaware		46-1585622						
	y under the law of which it is incorporated)	(FEI number, if applicable)						
4. 12/17/2012	5							
	of incorporation)	(Date of duration, if other the	an perpetual)					
6. 01/31/2021								
·	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability	<i>y</i> )					
7 NE 65th S	treet Ste 200 Redmond, WA 98052							
	(Principal offi	ce <u>street</u> address)						
5800 Campus Ci	rcle Dr. E Ste 150B Irving, TX 75063		20					
	(Current mailir	ig address, if different)						
			APR					
8. Name and stree	Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)							
Name:	Corporation Service Company		<u>&gt;</u> -10					
Office Address:	1201 Hays Street							
	Tallahassec	, Florida	. 54					
	(City)	(Zip code)						
designated in this further agree to c and I am familiar	ent's acceptance: sed as registered agent and to accept service application, I hereby accept the appoints omply with the provisions of all statutes rewith and accept the obligations of my postorporation Service Company  (SY: Juand: Eller (Registered agent's significant agent's significant accept accept agent's significant accept	nent as registered agent and agree elative to the proper and complete sition as registered agent.	to act in this capacity. I					
10. Attached is a	certificate of existence duly authenticated, State, by the Secretary of State or other of	not more than 90 days prior to deli	very of this application to records in the jurisdiction					

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

A. DIRECTORS							
□ Chairman	Name: Jason Askew	□ Chairman	Name: David Bradford				
□Vice Chairman	Address: 5800 Campus Circle Dr Sto 150B	☐Vice Chairman	Address:				
Director	Irving, TX 75063	☐ Director	Irving, TX 75063				
President		☐President					
□Vice President		□Vice President					
□Socretary	☐ Treasurer	Secretary	☐ Treasurer				
□ Other	Other	□Other	Other				
□ Chairman	Patrick Lagerborg	E.G. et					
ШСенный		□ Chairman	Name:				
□Vice Chairman	Address: 5800 Campus Circle Dr. E. Ste	□Vice Chairman	Address:				
Director	Irving, TX 75083	Director					
□ President		President					
□Vice President		□Vice President					
☐ Secretary	Treasurer	Secretary	☐ Treasurer				
□ Other		Other	DOther				
□ Chairman	Name:	□ Chairman	Name:				
☐Vice Chairman	Address:	□Vice Chairman	Address:				
□ Director		Director					
□President		□President					
□Vice President		□Vice President					
☐Secuctary	□ Treasurer	☐S <del>ocretary</del>	☐ Trezsurer				
□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 hay be added to the index when filling your Florida Department of State Annual Report form.							
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, P.S.							
13. Jeson Askew - CEO / President							
(Typed or printed name and capacity of person signing application)							

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "USCUTTER 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 TWELFTH DAY OF APRIL, 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 SAID "USCUTTER INC."

WAS INCORPORATED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2012.

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

Authentication: 202940876

Date: 04-12-21