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***************************************	(Requestor's Name)				
	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
☐ 5 CK- 1	MAIL MAIL				
	(Business Entity Name)				
	(Document Number)				
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer					





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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 790452 7889A

AUTHORIZATION :

COST LIMIT : \$ 70'.00

ORDER DATE : May 3, 2021

ORDER TIME : 11:43 AM

ORDER NO. : 790452-010

CUSTOMER NO: 7889A

FOREIGN FILINGS

NAME: GRAY HAIR SOFTWARE, INC.

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT# 61592

EXAMINER:



April 30, 2021

Office of the Secretary of State Florida Department of State Division of Corporations 2415 N. Monroe St., Suite 810 Tallahassee, FL 32303

Re: Consent to Use Same or Similar Name

To Whom It May Concern:

I am the President and CEO of Gray Hair Software, LLC.

Gray Hair Software, LLC hereby consents to the use of "Gray Hair Software, Inc." as the name of a Delaware corporation filing its application to register the Delaware corporation as a foreign corporation in the State of Florida.

The undersigned certifies to being authorized by the holder of the existing name to give this consent.

The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument.

Please let me know if you have any questions or need any further information.

Very truly yours,

Gray Hair Software, LLC

Name: Thomas McCaully

Title: President and CEO

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.

	corporation; must include "INCORPORATED," "orp." "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATIO	N,"			
(If name unaugi)	able in Florida, enter alternate corporate name a	Wanted for the numbers of manageri	na hasinasa in	. Classida		
State of Delay		, , ,	•	Florida	4)	
(State or country under the law of which it is incorporated)		(FEI number if an	(FEI number, if applicable)			
(State or country under the law of which it is incorporated) 01/13/2000						
(Date of incorporation) 5.		(Date of duration, if other	(Date of duration, if other than perpetual)			
	(SEE SECTIONS 607.1501 & 607.150	02. F.S., to determine nenalty liabil	ity)			
I SE Ocean B	oulevard, Stuart, FL 34994	e street address)				
I SE Ocean B	oulevard, Stuart, FL 34994 (Principal offic			202	_	
Name and stre	oulevard, Stuart, FL 34994 (Principal offic	g address, if different)		2021 MAY -3	_ 	
Name and stree	oulevard, Stuart, FL 34994 (Principal offic (Current mailing	g address, if different)		2021 MAY - 3 AM	- - - - -	
Name and stre	(Principal office) (Current mailing) et address of Florida registered agent: (P.O.	g address, if different)		ယ်		

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.

By:

(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.

A. DIRECTORS	•						
□Chairman	Name: Thomas McCaully	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:	, ,			
□Director	Stuart, FL 34994	□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			
□ Chairman	Name:	□ Chairman					
□Vice Chairman	Address:		Address:				
□Director		□Director					
□President		□President					
□Vice President		□ Vice President					
☐ Secretary	□Treasurer	□Secretary		□Treasurer			
□Other	□ Other	□Other		□Other			
Important Fotice I individuals may be	Jse an attachment to report more than six (6). The attac added to the index when filing your Florida Departmen	hment will be image at of State Annual Re	d for reporting pure eport form.	rposes 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.							

Thomas McCaully, CEO

13.

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GRAY HAIR SOFTWARE, 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 THIRTIETH 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 "GRAY HAIR SOFTWARE, INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF JANUARY, A.D. 2000.

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



Authentication: 203101865

Date: 04-30-21

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