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00T - 7 2021 K. Brumbley

Incorporating Services, Ltd.

incserv^o

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com 850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQU	JEST DATE	10/12/2021

PRIORITY Regular Approval

OUR REF_#_(Order_ID#) 956619

ORDER ENTITY GUIDELINE, INC.

DI FACI	F DEDEC	DM THE	ENLINA	TNC CE	RVICES:
أحنت خاتات	e L'ELVIL		LOFFOR	17140 DE	KATCE2:

GUIDELINE, INC. (FL)

File the attached foreign qualification document and provide a certified copy.

NOTES:

\$78.75 Authorized

Email address for annual report reminders: radiv@incserv.com_

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, October 12, 2021 Page 1 of 1

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.

	orp," "Inc," "Co," or "Corp.")		
Guideline Techi	nologies. Inc.		
	able in Florida, enter alternate corporate name add	opted for the purpose of transacti	ng business in Florida)
Dalamasa			_
(State or countr	y under the law of which it is incorporated)	(FEI number if a	pplicable)
06/25/2015			
(Date	5	(Date of duration, if other	than perpetual)
		(Dute of diffation, if other	man perpetuary
-	(Date first transacted business in F	lorida if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1502	F.S., to determine penalty liabi	lity)
330 S. Cedros Av	renue. Suite 201, Solana Beach, CA 92075		
	(Principal office	street address)	
	(Current mailing a	ddress, if different)	20 2
			3- 3-4
Name and stree	n address of Florida registered agent: (P.O. I	Box NOT acceptable)	100 A
	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	FII OCT 12 AHLSSE
Name and stree	Incorporating Services, Ltd.	Box <u>NOT</u> acceptable)	FILED A
		Box <u>NOT</u> acceptable)	FILED OCT 12 AMIO AHISSES FION
Name:	Incorporating Services, Ltd. 1540 Glenway Drive	_	FILED OCT 12 AM IO: 3. AHLSSEE FLORES
Name:	Incorporating Services, Ltd. 1540 Glenway Drive		FILED OCT 12 AM 10: 38 AH 1886 FILED
Name; ffice Address:	Incorporating Services, Ltd. 1540 Glenway Drive Tallahassee (City)	_	FILED OCT 12 AM 10: 38 AHLSSEE FLORES
Name; ffice Address: Registered age	Incorporating Services, Ltd. 1540 Glenway Drive Tallahassee (City)	Florida 32301(Zip code)	FILED OCT 12 AM 10: 38 AH 1886 FILED
Name; ffice Address: Registered age aving been nam	Incorporating Services, Ltd. 1540 Glenway Drive Tallahassee (City) ent's acceptance: eed as registered agent and to accept service.	Florida 32301 Zip code) of process for the above state	AHASSIST FLEO AHASSIST FLOOR A corporation at the place to act in this capacity.
Name: ffice Address: Registered age aving been nam signated in this rther agree to co	Incorporating Services, Ltd. 1540 Glenway Drive Tallahassee (City) ent's acceptance: sed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes rela	Florida 32301 Florida (Zip code) of process for the above state at as registered agent and agr tive to the proper and comple	ee to act in this capacity.
Name: ffice Address: Registered age aving been namesignated in this rther agree to contact the second cont	Incorporating Services, Ltd. 1540 Glenway Drive Tallahassee (City) ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment	Florida 32301 Florida (Zip code) of process for the above state at as registered agent and agr tive to the proper and comple	ee to act in this capacity.
Name: ffice Address: Registered age aving been namesignated in this rther agree to contact the second cont	Incorporating Services, Ltd. 1540 Glenway Drive Tallahassee (City) ent's acceptance: sed as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes rela	Florida 32301 Florida (Zip code) of process for the above state at as registered agent and agr tive to the proper and comple	ee to act in this capacity.

^{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.

DocuSign Envelope ID: 9EC9F74D-BC8A-4550-AE1A-DD1967D1FF19 A. DIRECTORS Name: Kevin Busque Aaron Goldman □ Chairman □Chairman □Vice Chairman Address: ___ 330 S. Cedros Avenue Address: 330 S. Cedros Avenue ☐ Vice Chairman Suite 201 Suite 201 Director Director Solana Beach, CA 92075 Solana Beach, CA 92075 President □President □ Vice President ___ ☐ Vice President □ Secretary Treasurer □ Secretary □Treasurer □Other _____ ☐Other _____ □Other _____ □Other Name: Ryan Gilbert □ Chairman □ Chairman Name: ____ 330 S. Cedros Avenue □ Vice Chairman Address: □Vice Chairman Address: Suite 201 ■ Director □Director Solana Beach, CA 92075 □ President □President ☐ Vice President ☐ Vice President □ Secretary □Treasurer □Secretary ☐ Treasurer □Other _____ Other ____ □ Other _____ □Other _____ Name: Aydin Senkut ☐ Chairman ☐ Chairman Name: ____ 330 S. Cedros Avenue □Vice Chairman Address: □Vice Chairman Address: _____ Suite 201 ■ Director □ Director Solana Beach, CA 92075 □ President □ President □Vice President ____ ___ □ Vice President ☐ Secretary ☐ Treasurer Secretary ☐Treasurer □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 filing 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, F.S.

Kevin Busque, Chief Executive Officer

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GUIDELINE, 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 ELEVENTH DAY OF OCTOBER, 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 "GUIDELINE, INC."

WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2015.

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

Authentication: 204379921

Date: 10-11-21