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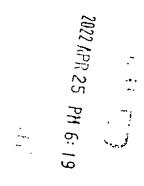
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S. FRANKLIN MAY 1 3 2022

COVER LETTER

	tration Section ion of Corporations			
SUBJECT:	Bitgreen, Inc.			
JOBALCI.		Name of corporation -	must include suffix	
Dear Sir or M	adam:			
*Certificate o	f Existence," or "Cer	eign Corporation for A tificate of Good Stand on to transact business	authorization to Transact Busine ing and check are submitted to s in Florida.	ss in Florida." register the
Please return	all correspondence c	oncerning this matter t	o the following:	
Jeffrey Truitt				
	<u> </u>	Name of P	erson	
Bitgreen, Inc.				
 _		Firm/Comp	pany	2
502 Hollowrid	lge Ct.			777
		Addres	SS	2022 HPR
Cary, NC 275	19			25
		City/State an	d Zip code	PH
jeff@bitgreen				<u> </u>
	E-mail	address: (to be used for	or future annual report notification	on) 5
For further in	iformation concernin	g this matter, please ca	all:	
Jeff Truitt		919 at (605-9963	
Nan	ne of Person	Area Code	Daytime Telephone Nu	mber
Regi Divi: The 2415	EET/COURIER Al stration Section sion of Corporations Centre of Tallahasses N. Monroe Street, S ahassee, FL 32303	٤	MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231	ons
Enclosed is a Please make o □ \$70.00 Fi	ling Fee ☐ \$78	RIDA DEPARTMENT	State of the stat	37,50 Filing Fee, ertificate of Status & ertified 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.

	rporation; must include "INCORPORATED," "(rp." "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION,"	
me., co., co	, , , , , , , , , , , , , , , , , , ,		
(If name unavaila	ble in Florida, enter alternate corporate name ado	pted for the purpose of transacting busine	ess in Florida)
Delaware	3		
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
September 10, 20			
(Date	of incorporation)	oration) 5. (Date of duration, if other than perpetual)	
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502	orida, if prior to registration) . F.S., to determine penalty liability)	~2
7750 Okeechobee	Blvd, Ste 4-343, West Palm Beach, FL 33411		2022 APR
(Principal office street address)		street address)	
			25
-	(Current mailing a	iddress, if different)	PH
			<u>ن</u> م
. Name and stree	t address of Florida registered agent: (P.O. I	Box NOT acceptable)	19
Name:	Registered Agents Inc.	<u></u>	
Office Address:	7901 4th St N STE 300		
	St. Petersburg	, Florida	
	(City)	(Zip code)	

9. Registered agent's acceptance:

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.

Registered Agents Inc.
Bill Havre - Assistant Secretary

(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.

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

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A. DIRECTORS	, , , , , , , , , , , , , , , , , , ,			
□Chairman	Name: Adam Carver	□Chairman	Name:	_ _
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	7750 Okcechobee Blvd, Ste 4-343	□Director		
■President	West-Pulm Buh, FL33411	□President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		Other
□Chairman	Name:	□Chairman	Name.	
□Vice Chairman		□Vice Chairman	Address:	
□Director	7750 Okeechobee Blvd, Ste 4-343	□Director		
□President	West Palm Beach, FL 33411	□President		
□Vice President		□Vice President		
■ Secretary	□Treasurer	☐ Secretary		☐ Treasurer
□Other	□Other	Other		□Other \
				 131
□Chairman	Name:	□Chaiπnan	Name:	PH 6:
□Vice Chairman	Address:	□Vice Chairman	Address:	
□1 Director		□Director		
□President		□President	 -	
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Cither		□Other		□Other
individuals may b	Use an attachment to report more than six (6). The attachment and the added to the index when filing your Florida Department of the ind	ent of State Annual I	Report form.	
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.

Adam Carver, CEO



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BITGREEN 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 THIRTEENTH DAY OF APRIL, A.D. 2022.



Authentication: 203171047

Date: 04-13-22