F22000004683

(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Octanica copies						
Special Instructions to Filing Officer:						

Office Use Only



600391682516

FART 177 - 03077 - 037 - ++70.00

SECRETARS ELECTION OF TALLAHASSEE FLORIOF

TALLAHASSEE, FI OBL

NEOTI ST

K. SALYJUL 27 2022

CORPORATE

When you need ACCESS to the world

ACCESS,

INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COPY	
XX	РНОТОСОРУ	
	CUS	
XX	FILING	FOREIGN INC
-	TWOS TECHNOLOGIES (CORPORATE NAME AND DOCUM	
-	(CORPORATE NAME AND DOCUM	ENT#)
-	(CORPORATE NAME AND DOCUM	ENT#)
_	(CORPORATE NAME AND DOCUM	ENT#)
_		
	(CORPORATE NAME AND DOCUM	ENT#)

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. Twos Technologies Incorporated (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Delaware (State or country under the law of which it is incorporated)

(FEI number, if applicable) 2. January 25, 2021 (Date of incorporation) July 26, 2022 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 802 East Whiting Street, Tampa, FL 33602 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Parker Klein Name: 802 East Whiting Street Office Address: Tampa _____ , Florida _ (City) 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.

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: 7109B6B2-0EBD-4AE7-850D-A1DE2344B9A3

Joseph Steilberg Chairman Name:	A. DIRECTORS	Parker Klein			
Ovice Chairman Address: Ovice President Ovice Chairman Name: Ovice Chairman Address: Ovice Chairman Address: Ovice President Ovice Pre	□ Chairman	Name:	□ Chairman	Name:	
Director	□Vice Chairman	Address:	□Vice Chairman	Address:	
Ovice President	Director	•	Director		
Secretary Treasurer Treasurer Secretary Treasurer Secretary Treasurer Treasu	President		□President		
Other Othe	□Vice President		□Vice President		
Joseph Steilberg Chairman Name:	Secretary Chief Executiv	☐Treasurer	□ Secretary		□Treasurer
Chairman Name:	Other	Other	□Other		□Other
Vice Chairman Address: Vice Chairman Address:	□Chairman	Name:	□Chairman	Name:	
Tampa, FL 33602 Director President Vice President Vice President Secretary Treasurer Other	□Vice Chairman		□Vice Chairman	Address:	TALL TO THE TALL THE
□ President □ President □ Vice President □ Vice President □ □ Other □ Other □ □ Oth		Tampa, FL 33602			
□Secretary □Treasurer □Secretary □Treasurer □Other □Other □Other □Other □Other □ □Chairman Name: □Chairman Name: □Vice Chairman Address: □Vice Chairman Address: □Vice Chairman Address: □Director □Director □Director □President □Vice President □Vice Pres	□President		□President		5, 0
□Other □	□Vice President		□Vice President		- 65 0
□Chairman Name: □Chairman Name: □Vice Chairman Address: □Director □Director □Director □President □President □Vice President □Vice President □Vice President □Chairman Address: □C	☐ Secretary	T reasurer	□ Secretary		□Treasurer □
□ Vice Chairman Address: □ Vice Chairman Address: □ Director □ Director □ President □ President □ Vice President □ Vice President □ Secretary □ Treasurer □ Other □ 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	□Other	Other	Other		□Other
□ Director □ □ Director □ □ President □ □ Vice President □ □ Vice President □ □ Vice President □ □ Other □ □ □ Other □ □ Othe	□Chairman	Name:	□Chairman	Name:	
□ President □ Vice President □ Vice President □ Vice President □ Secretary □ Treasurer □ Secretary □ Treasurer □ Other □ □ Ot	□Vice Chairman	Address:	□Vice Chairman	Address:	
□ Vice President □ Secretary □ Treasurer □ Other □ Other □ □ Othe	□Director		Director		
□Secretary □Treasurer □Secretary □Treasurer □Other □Othe	□President		□President		-
☐Other ☐	□Vice President		□Vice President		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexe	□Secretary	□Treasurer	☐ Secretary		□Treasurer
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexe	Other	Other	Other		Other
individuals may be added to the index when filing your Florida Department of State Annual Report form.	Important Notice: I	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep	e attachment will be imaged artment of State Annual Re	d for reporting propert form.	ourposes only. Non-indexed
12. Signature of Director or Officer	12	Parter	thin		

Parker Klein, Director and Chief Executive Officer

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "TWOS TECHNOLOGIES INCORPORATED" 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 TWENTY-SIXTH DAY OF JULY,

A.D. 2022.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TWOS

TECHNOLOGIES INCORPORATED" WAS INCORPORATED ON THE TWENTY-FIFTH DAY

OF JANUARY, A.D. 2021.

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

FILEU 26 PH 1: OF



Authentication: 204008340

Date: 07-26-22