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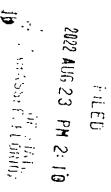
(F	Requestor's Name)				
(/	Address)				
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PICK-UP	☐ WAIT	MAIL			
(E	Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to Filing Officer:					





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T. LEMIEUX AUG 3 0 2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Conduit Tech, Inc.	
Name of corporation	n - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Star above referenced foreign corporation to transact businesses."	iding" and check are submitted to register the
Please return all correspondence concerning this matter Shelby Breger	r to the following:
Name of	Person
Conduit Tech, Inc.	
Firm/Com	npany
555 NE 8th Street, Unit 1908	
Addro	288
Fort Lauderdale, FL, 33304	
City/State as	nd Zip code
info@getconduit.com	
E-mail address: (to be used f	or future annual report notification)
For further information concerning this matter, please c	all:
Shelby Breger at (650	2783754
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 DEPARTMENT \$70.00 Filing Fee \$\Bigcup \text{\$578.75 Filing Fee & Boundary Certificate of Status}	OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee. Certified Copy Certified Copy Certified Copy

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.

"Inc.," "Co.," "(corporation; must include "INCORPORATED," Corp." "Inc." "Co," or "Corp.")	COMPANT. CORPORA	HON,	
(If name unavai	lable in Florida, enter alternate corporate name ac	lopted for the purpose of trans	acting business in Florida)	
15.1				
(State or country under the law of which it is incorporated) 03/30/2022				
(Date 07/26/2022	e of incorporation)	(Date of duration, if other than perpetual)		
55 Mt. Od. C	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 2, F.S., to determine penalty li	ability)	
	et, Fort Lauderdale, FL 33304			
	(Principal office	street address)		
	et address of Florida registered agent: (P.O. Registered Agents Inc.	address, if different) Box <u>NOT</u> acceptable)		
Name:	et address of Florida registered agent: (P.O.	ŕ	2022	
Name:	et address of Florida registered agent: (P.O. Registered Agents Inc. 7901 4th St N STE 300	Box <u>NOT</u> acceptable)	2022 AUG .	
Name:	et address of Florida registered agent: (P.O. Registered Agents Inc. 7901 4th St N STE 300	ŕ	2022 AUG 23	
Name: Tice Address: Registered agving been namignated in this ther agree to c	et address of Florida registered agent: (P.O. Registered Agents Inc. 7901 4th St N STE 300 St. Petersburg	Box NOT acceptable)	ated corporation at the p	

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	Shelby Breger Name:	□Chairman	Name: Marisa Reddy			
□Vice Chairman	Address: 555 NE 8th Street	□ Vice Chairman	Address: 7 Primus Ave			
□Director	Unit 1908	□Director	Unit 9			
■ President	Fort Lauderdale, FL 33304	□President	Boston, MA 02114			
□ 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						
□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			
Important Notice: Undividuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department of Direction of	partment of State Annual Rep	port 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						

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.

13. Shelby Breger

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

DELAWARE, DO HEREBY CERTIFY "CONDUIT TECH, 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 SIXTEENTH DAY OF AUGUST, A.D. 2022.

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

Authentication: 204175305

Date: 08-16-22