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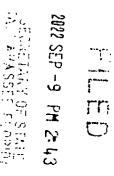
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SEP - 9 2022 M. SOLOMON

	COVER LET	TER		
TO: Registration Section Division of Corporations				
SUBJECT: BRACTLET, INC.				
	Name of corporation - n	nust include suffix		
Dear Sir or Madam:				
The enclosed "Application by Fo "Certificate of Existence," or "Ce above referenced foreign corpora	ertificate of Good Standing	horization to Transact Business in Flog" and check are submitted to register in Florida.	orida," the	
Please return all correspondence of	concerning this matter to t	the following:		
David McCain, Esq.				
	Name of Pers	son		
Backpack Group, LLC				
	Firm/Compan	y		
201 Alhambra Circle, Ste. 510				
	Address		• " (.	202:
Coral Gables, FL 33134			** ** !*!**1	2022 SEP -9
·	City/State and Z	(ip code	5.85	-0
david.mccain@backpacknetworks.co			414 25	-
E-mail	address: (to be used for f	uture annual report notification)	(c)	
For further information concerning	g this matter, please call:		97. 17.	2:43
David McCain	at ()	333-0434		
Name of Person	Area Code	Daytime Telephone Number	_	
STREET/COURIER AI Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, S Tallahassee, FL 32303	:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the follow	ing amount:			

■ \$78.75 Filing Fee &

□ \$87.50 Filing Fee.

Please make check payable to: FLORIDA DEPARTMENT OF STATE

□ \$70.00 Filing Fee □ \$78.75 Filing Fee &

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,

I. BRACTLET, IN				_	
	orporation; must include "INCORPORATE orp." "Inc." "Co." or "Corp.")	D.	" "COMPANY." "CORPORATION."		
(If name unavail			adopted for the purpose of transacting business in Florida)	_	
2 Delaware		3.	3 46-4446954		
(State or countr	State or country under the law of which it is incorporated) (FEI number, if applicable)			_	
12/30/2013		Perpetual 5.			
(Date of incorporation)			(Date of duration, if other than perpetual)		
ó					
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	_	
201 Alhambra Ci	rcle, Ste. 510, Coral Gables, FL 33134		702. 1 to determine penanty hability)		
7		dfi	ice street address)	-	
Same as above	(Timelpure	,,,,	actives dedicasy		
	(Current mai	ilin	ng address, if different)		
			<u> </u>	20:	
8. Name and stree	et address of Florida registered agent: (I	P.C	D. Box NOT acceptable)	2022 SEP	
Name	David McCain, Esq.				
Name:	201 A Warrahar C' al. C. 510			9	
Office Address:	201 Alhambra Circle, Ste. 510			PΜ	
	Coral Gables			\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	(City)		(Zip code)	င ် ယ	

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 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.

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				•		

A. DIRECTORS ☐Chairman	Please see attached Exhibit A	Te New immers	Maria a			
	Name:	□ Chairman				
	Address:	□Vice Chairman	Address:			
□Director		□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	ري ^ا د	21
□Other	Other	□Other		□Other		2022 SEP
□Chairman	Name:	□ Chairman	Name:		ASSET	9
□Vice Chairman	Address:	□Vice Chairman	Address:		787	<u>.⊅</u> :
□Director		□Director			### 	: 43
□President		□Presidem				
□Vice President		□Vice President			<u>.</u> .	
□Secretary	□Treasurer	☐ Secretary		□Treasurer		
□Other	□Other	□Other	 	□Other		
Important Notice: individuals may be	Use an attachment to report more than six (6). The attachment to the index when filing your Elorida Departme Signature of Director o	nt of State Annual Re	d for reporting peport form.		on-indexe	ed

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.



Exhibit A

Bractlet, Inc. – List of Officers

Title	NAME	ADDRESS
Chairman and Chief Executive Officer	David Kaiserman	201 Alhambra Cir., Ste. 510 Coral Gables, FL 33134
President and Chief Operating Officer	Mark Trutna	201 Alhambra Cir., Ste. 510 Coral Gables, FL 33134
EVP, Chief of Staff	Malachi Boyuls	201 Alhambra Cir., Ste. 510 Coral Gables, FL 33134
EVP, Chief Development Officer	Amanda Bush	201 Alhambra Cir., Ste. 510 Coral Gables, FL 33134
EVP, Strategy and Corporate Development	Christian Falk	201 Alhambra Cir., Ste. 510 Coral Gables, FL 33134
EVP, Chief Financial Officer	Waynewright Malcolm	201 Alhambra Cir., Ste. 510 Coral Gables, FL 33134
EVP, Secretary, and General Counsel	David McCain	201 Alhambra Cir., Ste. 510 Coral Gables, FL 33134





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

DELAWARE, DO HEREBY CERTIFY "BRACTLET, 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 TWENTY-FOURTH DAY OF AUGUST, 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 "BRACTLET, INC."

WAS INCORPORATED ON THE THIRTIETH DAY OF DECEMBER, A.D. 2013.

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

Authentication: 204237020

Date: 08-24-22

5457290 8300



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 1, 2022

DAVID MCCAIN, ESQ. BACKPACK GROUP, LLC 201 ALHAMBRA CIRCLE, STE. 510 CORAL GABLES, FL 33134

SUBJECT: BRACTLET, INC. Ref. Number: W22000112004

We have received your document for BRACTLET, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

√ The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Letter Number: 322A00019519

RECEIVED

SEP 0 9 2022