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PICK-UP	MAIT	MAIL		
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Certified Copies	Certificates	of Status		
Special Instructions to Film	na Officer:			
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W23000138	<u>038</u>			

Office Use Only



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COVER LETTER

:

TO:	Registration Section Division of Corporations					
SUBJ	JECT:	Fynn, Inc.				
		Name of corporatio	ก - mu	st include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existence,"	n by Foreign Corporation for or "Certificate of Good Sta corporation to transact busin	nding"	and check are sub-		
Please	return all correspor	ndence concerning this matte	r to th	e following:		
Diana	Tobin					
		Name of	Perso	n		
Fynn,	Inc.					
		Firm/Cor	npany	······································	··· • • • • • • • • • • • • • • • • • •	
1000 3	N West Street Suite 12	81-257				
		Addi	ress			
Wilmi	ngton, DE 19801					
		City/State	and Zi	p code		
legal@	gfynneredit.com					
		E-mail address: (to be used	for fut	ure annual report n	otification)	
For fu	rther information co	ncerning this matter. please	call:			
Diana	Tobin	at (le Daytime Telephone Number			
	Name of Person	Area Co	de	Daytime Telepl	hone 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			
Please		o: FLORIDA DEPARTMEN	□ S78	TATE .75 Filing Fee & tified Copy	S87.50 Filing Fee, Certificate of Status & Certified 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.

Delaware	lable in Florida, enter alternate corporate name ad		
AS NO MAIN	ry under the law of which it is incorporated)	3-4658790 (FEI number, if a	pplicable)
(Date	e of incorporation) 5	(Date of duration, if other	than perpetual)
	07/12/202		
400.0	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)	lorida, if prior to registration) 2, F.S., to determine penalty liabil	lity)
420 Summit Av	enue. Suite 401 Saint Paul, MN 55102 (Principal office	-44 11	
		street address)	
1000 N. West S	Street, Suite 1281-257 Wilmington, DE 19801	address, if different)	
	(021141111111111111111111111111111111111	address, it different)	
Name and stre	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	<i>⊙</i> ⊳
Name and stre	et address of Florida registered agent: (P.O. Corporation Service Company	Box <u>NOT</u> acceptable)	2023 O
Name:	•	Box <u>NOT</u> acceptable)	\$50.00T -
Name:	Corporation Service Company 1201 Hays Street		SEATER AUST
	Corporation Service Company 1201 Hays Street	Box NOT acceptable)	١.
Name: fice Address:	Corporation Service Company 1201 Hays Street Tallahassee (City)		١.
Name: fice Address: Registered ag	Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance:	, Florida 32301(Zip code)	PH 4: 04 ISSEE: FL
Name: fice Address: Registered ag ving been nan ignated in this	Corporation Service Company 1201 Hays Street Tallahassee (City)	Florida 32301 (Zip code) of process for the above state nt as registered agent and agr	d corporation at the

^{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	Name: Eric Mences	□Chairman	Ethan Anderson Name:		
□Vice Chairman	1000 N. West St. STE 1281#257 Address: Wilmington, DE 19801	□Vice Chairman	1000 N, West St. STE 1281#257 Address: Wilmington DE 19801		
□Director		□Director			
□President		□President			
□Vice President	IL-S-NAME	□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	□ Treasurer		
Other Chief Exec	utive Officer	□Other Chief Strat	egy Officer		
□ Chairman	Name: Kent Schoen	□Chairman	Name: Bhavin Gupta		
□Vice Chairman	1000 N West St STE 1281#257	□Vice Chairman	Address: Wilmington DE 19801		
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer		
□Other General C	Counsel DOther Chief Compliance Officer	Other Chief Tech	nology Officer [1Other]		
□ Chaimian	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		
	Use an attachment to report more than six (6). The att added to the index when filing your Florida Departm				
12.	Kent School				
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.					
I3. Kent Schoer	n, CCO & GC	<u> </u>			

Page 1



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

DELAWARE, DO HEREBY CERTIFY "FYNN, 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 FIRST DAY OF AUGUST, A.D. 2023.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FYNN, INC." WAS INCORPORATED ON THE EIGHTH DAY OF MAY, A.D. 2019.

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

Authentication: 203866983

Date: 08-01-23



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are <u>optional</u>. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active"
 status. The first report is due in the year following formation. The report must be filed
 electronically online between January 1st and May 1st. The fee for the annual report is
 \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual
 Report Reminder Notices" are sent to the e-mail address you provide us when you submit
 this document for filing. To file any time after January 1st, go to our website at
 www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.