

F24 000002253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

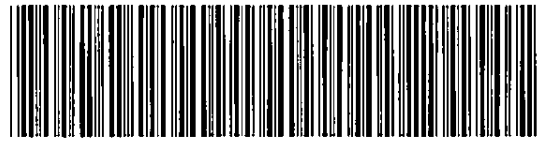
Certified Copies _____

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Special Instructions to Filing Officer:

W24-64772

Office Use Only



200426816822

2024 APR 24 PM 1:36



DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2024 APR 24 PM 2:29

RECEIVED

APR 26 2024

K. Brumbley

WB



FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORRECTED
Please Allow For
Same File Date

April 24, 2024

CT

CORREC
Please Allow
Same File

SUBJECT: CARDIOONE, INC.
Ref. Number: W24000064772

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

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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 024A00008970

2024 APR 25 PM 2:07
TALLAHASSEE, FLORIDA

RECEIVED

CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 04/24/2024

Acc#120160000072

Eric DWH

Name:	CardioOne, Inc.
Document #:	
Order #:	15510796

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **78.75**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CardioOne, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Dan Jenson
Name of Person
CardioOne, Inc.
Firm/Company
10900 Research Blvd., Suite 160C, Unit #2722
Address
Austin, TX 78759
City/State and Zip code
dan@cardioone.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marcie Barr at (512) 695-3772
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 OF STATE**

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 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.

1. CardioOne, Inc.
(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)

2. Delaware 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1/22/2021 5. 86-2155558
(Date of incorporation) (Date of duration, if other than perpetual)

6. April 1, 2024
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 10900 Research Blvd., Suite 160C #2722, Austin, TX 78759
(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

2024 FEB 24 PM 1:36

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.

Kathy Widdoes 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]:

A. DIRECTORS

Chairman Name: Oliver Moses
 Vice Chairman Address: 10900 Research Blvd.
 Director Suite 160C, Unit #2722
 President Austin, TX 78759
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Jon Gavras
 Vice Chairman Address: 10900 Research Blvd.
 Director Suite 160C, Unit #2722
 President Austin, TX 78759
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Jacob Stark
 Vice Chairman Address: 10900 Research Blvd.
 Director Suite 160C, Unit #2722
 President Austin, TX 78759
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Eric Reimer
 Vice Chairman Address: 10900 Research Blvd.
 Director Suite 160C, Unit #2722
 President Austin, TX 78759
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Nate Snyder
 Vice Chairman Address: 10900 Research Blvd.
 Director Suite 160C, Unit #2722
 President Austin, TX 78759
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Chris Sueling
 Vice Chairman Address: 10900 Research Blvd.
 Director Suite 160C, Unit #2722
 President Austin, TX 78759
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Jasen Gundersen

 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.

13. Jasen Gundersen

 (Typed or printed name and capacity of person signing application)

Additional Officers/Directors

A. Directors

Jasen Gundersen
10900 Research Blvd.
Suite 160C, Unit #2722
Austin, TX 78759

Director
Chief Executive Officer, President and Secretary

Dan Jenson
10900 Research Blvd.
Suite 160C, Unit #2722
Austin, TX 78759

Chief Financial Officer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARDIOONE, 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 APRIL, A.D. 2024.

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

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



4833320 8300

SR# 20241617811

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203320179

Date: 04-24-24