

**P/2000/03906**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6381

RECEIVED DEC 27 2012

From: Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850) 521-0821  
Fax Number : (850) 558-1515

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
SPRINGBIG, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

**FILED**  
12 DEC 27 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*K 12/28/12*

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## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

SpringBig, Inc.

**ARTICLE II PRINCIPAL OFFICE**Principal street address

7495 Dublin Drive

Boca Raton, Florida 33433

Mailing address, if different is:

same

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000 shares of Common Stock, no par value.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Corporation Service Company

Address: 1201 Hays Street

Tallahassee, Florida 32301

**ARTICLE VII INCORPORATOR**

The name and address of the incorporator is:

Name: Gary L. Wall

Address: 150 South Wacker Drive, Suite 1500

Chicago, Illinois 60605

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

*Becky Pearce*Becky Pearce  
Assistant Vice President

Required Signature/Registered Agent

12/27/2012

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

*[Signature]*

Required Signature/Incorporator

12/27/2012

Date

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