## F24000004232

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PiCK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



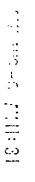
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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

	corporation; must include "INCORPORATED," * forp," "Inc." "Co." or "Corp.")	COMPANY," "CORPORATIO	)N."	
(If name unavai	able in Florida, enter alternate corporate name ad-	opted for the purpose of transact	ing business in Florida)	
Delaware	,			
(State or count	y under the law of which it is incorporated)	(FEI number, if a	applicable)	
12/22/2020				
4. (Date	of incorporation) 5	(Date of duration, if other	r than perpetual)	
6.				
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		lity)	
7014 E Camelba	ck Rd B100A, Suite #69 Scottsdale, AZ 85251			
· ·	(Principal office	street address)		
	(Current mailing a	iddress, if different)		
8. Name and stre	et address of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)		
Name:	Registered Agents Inc.			
Office Address:	7901 4th St N Ste 300		45	۰,۰
Office Address.	St. Petersburg	— 33702	<b>9</b>	€
	(City)	Florida 33702 (Zip code)	2* 	
	(City)	(Zip code)		٠
	ent's acceptance:		ي -	•
Having been nan designated in this	ned as registered agent and to accept service application. I hereby accept the appointmen	of process for the above state of as registered agent and ag	ed corporation at the process of act in this capac	dace i in 1:
further agree to c	omply with the provisions of all statutes rela	tive to the proper and compl	ete performance of my	duties.
and I am familiai	with and accept the obligations of my positi	ion as registered agent.	$\omega$	
			3	
	David Kalzents			
_	(Registered agent's sign	ature)		

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 Alex Glenn	□Charman	Name Ethan Mueller			
OVice Chairman	7014 E Camelback Rd B100A,	□Vice Chairman	Address 7014 E Camelback Rd B100A,			
Director	Suite #69	Director	Suite #69			
■ President	Scottsdale, AZ 85251	☐President	Scottsdale, AZ 85251			
□Vice President		□Vice President				
☐ Secretary	Treasurer	☐ Secretary	OTreasurer .			
□ Other		ට0ther	Other			
□ Chairman	Name Jacob Peplinski	☐ Chaurman	Name Denise Glenn			
□Vice Chairman	Address 7014 E Cemelback Rd B100A,	☐Vice Chairman	Address 7014 E Camelhack Rd B100A,			
Director	Suite #69	Director	Suite #69			
☐ President	Scottsdale, AZ 85251	□ President	Scottsdale, AZ 85251			
□Vice President		☐Vice President				
□ Secretary:	OTreasurer	Secretary	OTressurer			
□0ther		□ Other	ClOther			
□ Chaurman	Name	□Charman	Name			
□Vice Chairman	Address	∐Vice Chairman	Address'			
Director		☐ Director				
□President		☐President				
□Vice President		□Vice President				
□ Secretary	☐Treasurer	☐Secretary	□Trezsurer			
20ther	Other	□0ther				
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.						
Signature of Director or Officer						
The officers on demonstrate						

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 \$ 817-155. F.S.

Denise Glenn , Secretary

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "UPLINQ, 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 NINTH DAY OF JULY, 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 SAID "UPLINQ, INC."

WAS INCORPORATED ON THE TWENTY-THIRD DAY OF DECEMBER, A.D. 2020.

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

Authentication: 203879542

Date: 07-09-24



Toll-Free: 1.888.449.2638



1.805.449.2638

Email: info@CorpNet.com





August 2, 2024

Registration Section
Division of Corporations
2415 N. Monroe St., Suite 810
Tallahassee, FL 32303

RE: UPLINQ, INC.

To whom it may concern:

The Enclosed Application by Foreign Corporation and Fee(s) are submitted for filing along. Also, please find enclosed a check for state filing fees and a certified copy in the amount of \$78.75 made payable to the FL Dept of State. Please contact me for information needed in regards to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addressed stamped envelope included.

Sincerely,

Amanda J. Beren, Sr. Document Analyst CorpNet, Incorporated 888-449-2638 Ext. 105 filings@corpnet.com

