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K. Brumbley

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Spellolenan

ACCOUNT NO.	:	12000000019	95
REFERÊNCE	:	883581	8355484
AUTHORIZATION	:		
COST LIMIT	:	\$ 70.00	
ORDER DATE : January 8, 2025			
ORDER TIME : 1:57 PM			
ORDER NO. : 883581-001			
CUSTOMER NO: 8355484			
			
FOREIGN F	<u>ILI1</u>	<u> 1GS</u>	
NAME: NUDGE GLOBAL (JS I	INC.	
XXXX QUALIFICATION (TYPE: CO	<u>)</u>)		
PLEASE RETURN THE FOLLOWING AS	PRO	OOF OF FILI	NG:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	AND]	ING	
CONTACT PERSON: Amanda Miller		EXT#	

EXAMINER:

COVER LETTER

	stration Section ion of Corporations			
SUBJECT:	NUDGE GLOBAL US INC.			
Jobace I.	Name o	f corporation -	must include suffix	
Dear Sir or M	ladam:			
"Certificate o	"Application by Foreign Corf Existence," or "Certificate ced foreign corporation to tra	of Good Stand	ing" and check are sub-	
Please return	all correspondence concerning	ig this matter t	o the following:	
SIMON HEAT	LEY			
		Name of P	erson	
NUDGE GLO	BAL LIMITED			
		Firm/Comp	any	
1111B SOUTI	H GOVERNOR'S AVENUE, #6	6089		
		Addres	S	
DOVER, DE	19904			
		City/State and	l Zip code	
SIMONPHEA	LEY@GMAIL.COM			
	E-mail address:	(to be used fo	r future annual report n	otification)
For further in	formation concerning this ma	ntter, please ca	n:	
SIMON HEAD	10N HEALEY at () 7590037860			
Nam	e of Person	Area Code	Daytime Teleph	none Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	
	check for the following amor- neck payable to: FLORIDA DE ing Fee	PARTMENT (; Fee &	OF STATE \$78.75 Filing Fee & Certified 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.

	BAL US INC.		
	corporation; must include "INCORPORATED corp." "Inc." "Co," or "Corp.")	," "COMPANY," "CORPORATI	ON."
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transac	ting business in Florida)
Delaware	3,		
(State or count	y under the law of which it is incorporated)	(FEI number, if	applicable)
06/09/2021	5		
(Date	ent incorporation)	(Date of duration, if other	er than perpetual)
11.11.37.303.1			
. JULY 2024 	(Date first transacted business) (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration) [502, F.S., to determine penalty liab	oility)
. 1111B South Go	(SEE SECTIONS 607.1501 & 607.1 vernor's Ave, #6089 Dover, DE 19904-6903	502, F.S., to determine penalty liab	
1111B South Go	(SEE SECTIONS 607.1501 & 607.1 vernor's Ave, #6089 Dover, DE 19904-6903 (Principal of overnor's Ave, #6089 Dover, DE 19904-6903	502, F.S., to determine penalty liable fice street address) ng address, if different)	2025 JAH - 9
. 1111B South Go	(SEE SECTIONS 607.1501 & 607.1 vernor's Ave, #6089 Dover, DE 19904-6903 (Principal off overnor's Ave, #6089 Dover, DE 19904-6903 (Current maili et address of Florida registered agent: (P.4 Corporation Service Company	502, F.S., to determine penalty liable fice street address) ng address, if different)	2025 JAN -9 PH
7. HHB South Go HHB South Go S. Name and stre Name:	(SEE SECTIONS 607.1501 & 607.1 vernor's Ave. #6089 Dover, DE 19904-6903 (Principal off overnor's Ave. #6089 Dover, DE 19904-6903 (Current maili et address of Florida registered agent: (P.4)	502, F.S., to determine penalty liable fice street address) ng address, if different)	2025 JAH - 9 PH 5:
1111B South Go 1111B South Go 3. Name and stre	(SEE SECTIONS 607.1501 & 607.1 vernor's Ave, #6089 Dover, DE 19904-6903 (Principal off vernor's Ave, #6089 Dover, DE 19904-6903 (Current maili et address of Florida registered agent: (P.4 Corporation Service Company 1201 Hays Street	502, F.S., to determine penalty liable fice street address) ng address, if different)	2025 JAN -9 PH

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.

Corporation Service Company By:	
(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.

A. DIRECTORS Simon Healey □Chairman Name: □ Chairman Name: 1111B South Governor's Ave, #6089 ☐ Vice Chairman Address: □Vice Chairman Address; Dover, DE 19904-6903 ■ Director □ Director □President □President ☐ Vice President ☐ Vice President □ Secretary Treasurer □ Secretary □Treasurer □Other _____ □Other _____ □Other _____ ☐Other _____ Jeremy Beament □Chairman Name: ☐ Chairman Name: 1111B South Governor's Ave, #6089 □Vice Chairman Address: □Vice Chairman Address: Dover, DE 19904-6903 ■ Director □ Director □ President □President □Vice President □Vice President □Treasurer □Treasurer □ Secretary ☐ Secretary □Other _____ □Other _____ □Other _____ □Other _____ □Chairman Name: □ Chairman □Vice Chairman Address: □ Vice Chairman Address: □ Director □ Director □ President □ President ☐ Vice President _ □Vice President ☐ Secretary □Treasurer □ Secretary □Treasurer □Other _____ □Other _____ □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. Simon Healey 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.

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

Simon Healey, Treasurer

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Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "NUDGE GLOBAL US 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 EIGHTH DAY OF JANUARY, A.D. 2025.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NUDGE GLOBAL US INC." WAS INCORPORATED ON THE NINTH DAY OF JUNE, A.D. 2021.

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

Authentication: 202643764

Date: 01-08-25