Division of Corporations

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(((H25000028211 3)))



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From:

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FOREIGN PROFIT/NONPROFIT CORPORATION SubItUp, Inc.

Certificate of Status	1
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K. SALY

IAN 2 9 2025



January 27, 2025

FLORIDA DEPARTMENT OF STATE Division of Corporations

COMPUTERSHARE

SUBJECT: SUBITUP, INC.

REF: W25000010105

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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

Andrea Andrews Regulatory Specialist II Registration Section

FAX Aud. #: H25000028211 Letter Number: 125A00001648

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.

SubltUp, Inc.		
	corporation; must include "INCORP Corp," "Inc," "Co," or "Corp.")	ORATED," "COMPANY," "CORPORATION,"
SubltUp Softwa	are, Inc.	
(If name unavail	able in Florida, enter alternate corpo	orate name adopted for the purpose of transacting business in Florida)
2. Delaware		3
(State or countr	ry under the law of which it is incorp	orated) (FEI number, if applicable)
4. 09/03/2010		5(Date of duration, if other than perpetual)
(Date	of incorporation)	(Date of duration, if other than perpetual)
6		
		business in Florida, if prior to registration) 1 & 607.1502, F.S., to determine penalty liability)
303 Perimeter Co	enter North, Suite 450, Atlanta, GA	30346
	(Pr	incipal office street address)
	(Cui	rent mailing address, if different)
O Ninma and atom	-• d-d	gent: (P.O. Box NOT acceptable)
o. Name and <u>stree</u>		gent: (P.O. Box NOT acceptable)
Name:	Corporate Creations Network In	
Office Address:	801 US Highway 1	
	North Palm Beach	. Florida 33408 (Zin code)
	(City)	(Zip code)
Having been nam designated in this further agree to c	application, I hereby accept the omply with the provisions of all	cept service of process for the above stated corporation at the place appointment as registered agent and agree to act in this capacity. I statutes relative to the proper and complete performance of my duties, of my position as registered agent.
	/s/ Kunning Chen	Kunning Chen, Special Secretary
_	(Registered	d 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.

 \bigcirc 01/28/2025 6:55 AM 15612148442 \rightarrow 18506176383 pg 3 of 5

A. DIRECTORS							
□Chairman	Name: Marjan Elbaum	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
303 Perimeter Center North, Suite 450 ■Director		Director	303 Perimeter Center North, Suite 450				
□President Atlanta, GA 30346		President	Atlanta, GA 30346				
□Vice President		□Vice President					
■ Secretary	□Treasurer	☐ Secretary	Treasurer				
Other	Other	Other	Other				
Chairman	Name: Benji Sucher	Chairman	Rick Hudson Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director		□Director					
□President	Atlanta, GA 30346	□President	Atlanta, GA 30346				
□Vice President		□Vice President					
☐ Secretary	Treasurer	☐ Secretary	□Treasurer				
Other	Other	■Other	□Other				
Chairman	Name:	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director		Director					
□President		□President					
□Vice President		□Vice President	-2				
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. 12. 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.

Delaware The First State

Page 1

I, KRISTOPHER E. KNIGHT, ACTING SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUBITUP, 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-SECOND 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 "SUBITUP, INC." WAS INCORPORATED ON THE THIRD DAY OF SEPTEMBER, A.D. 2010.

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

Kristopher E. Knight, Acting Secretary of State Authentication: 202749703

Date: 01-22-25