## F16000003564

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DATE:

6/22/20

NAME: SONDER USA INC

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION:** 

ABBIE/PAUL, HA

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: SONDER USA INC	<b>)</b> .
Name	of Corporation
DOCUMENT NUMBER: F1600000	03564
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Megan Morrisse	ey
Name o	of Contact Person
	e Services Delaware Ltd.
200 Bellevue Pa	arkway, Suite 210
	Address
Wilmington, DE	19809
City/Sta	ate and Zip Code
intertrustus@int	ertrustgroup.com
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, pla	
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	Department of State.
Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607,050; inge is submitted for a corpora or to change its registered office	tion organized under the la	iws of the State o	f_Delaware	<i>S</i>
1. The name of	the corporation: SONDER	USA INC.			
2. The principal	office address: 101 15th S	St., San Francisco, (	CA 94103		
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 8/9/20	Document Document	number: F160	00003564	1
	d street address of the current re rtment of State: (If resigned, en		red office on file	~ .	
	C T CORPORATION	SYSTEM		70.00 10.00	
	1200 SOUTH PINE IS	SLAND ROAD	1'	2020 JUN 22 SECKETAR	FILED
	PLANTATION, FL 333	324		PSSE PSSE PSSE PSSE PSSE PSSE PSSE PSSE	m
6. The name and (if changed):	d street address of the new regis	stered agent (if changed) ar	nd /or registered o	TO J	Ō
	Florida Filing & Searc	h Services Inc.		_	
	155 Office Plaza Dr.,	Suite A			
		O. Box. NOT acceptable			
	Tallahassee, FL 3230			_	
The street address changed will	ess of its registered office and the identical.	the street address of the bi	usiness office of	its registered	agent,
Such change wa authorized by th	as authorized by resolution dul- ne board, or the corporation ha	y adopted by its board of a been notified in writing	directors or by a of the change.	n officer so	
David Gard		David Gard			
Lhereby accent	the appointment as registered to comply with the provisions a my duties, and I am familiar wis document is being filed mere that the korporation has been	agent and agree to act in of all statutes relative to th with and accept the obliga- ely to reflect a change in t notified in writing of this	ed or typed name and this capacity. the proper and co tion of my position the registered off change.  1-19-20		ed I
Sig	nature of Registered Agent	_	Date		
If signing on be	half of an entity:				
PAYE D.	Hoch L. yped or Printed Name				

\* \* \* FILING FEE: \$35.00 \* \* \*