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

ACCOUNT NO. : I20000000195
REFERENCE : 290855    5154219
AUTHORIZATION : 
COST LIMIT : $ 70.00

ORDER DATE : July 9, 2018
ORDER TIME : 2:04 PM
ORDER NO. : 290855-005
CUSTOMER NO: 5154219

FOREIGN FILINGS

NAME: BOLT MOBILITY CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_______ CERTIFIED COPY
XX  PLAIN STAMPED COPY
_______ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXIT# 62969

EXAMINER: ___________________
COVER LETTER

TO: Registration Section  
Division of Corporations  
Bolt Mobility Corporation

SUBJECT: Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed “Application by Foreign Corporation for Authorization to Transact Business in Florida,” “Certificate of Existence,” or “Certificate of Good Standing” and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Marty Kennedy

Perkins Coie LLP

3150 Porter Drive

Palo Alto, California 94304

mkenney@perkinscoie.com

For further information concerning this matter, please call:

Marty Kennedy

650 838-4434

STREET/COURIER ADDRESS:
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Fl. 32301

MAILING ADDRESS:
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

Enclosed is a check for the following amount:

☐ $70.00 Filing Fee  ☐ $78.75 Filing Fee & Certificate of Status  ☐ $78.75 Filing Fee & Certified Copy  ☐ $87.50 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.

Bolt Mobility Corporation

1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc." "Co.," "Corp." "Inc." "Co." or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated) 3. ________________________

(FEI number, if applicable)

4. May 1, 2018

(Date of incorporation) 5. ________________________

(Date of duration, if other than perpetual)

6. ________________________

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

9703 Collins Avenue, Unit #1000C, Bal Harbour, Florida 33154

7. ________________________

(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(City) (Zip code)

9. Registered agent's acceptance:

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: ________________________

(Roxanne Turner
Asst. Vice President

(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.
11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: ____________________________  
Address: ____________________________________________

Vice Chairman: ____________________________  
Address: ____________________________________________

Shervin Pishevar  
Director: Shervin Pishevar  
Address: 9703 Collins Avenue, Unit #1000C, Bal Harbour, Florida 33154

B. OFFICERS

President: Shervin Pishevar  
Address: 9703 Collins Avenue, Unit #1000C, Bal Harbour, Florida 33154

Vice President: ____________________________  
Address: ____________________________________________

Secretary: ____________________________  
Address: ____________________________________________

Treasurer: ____________________________  
Address: ____________________________________________

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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.

Shervin Pishevar, Chief Executive Officer

13. ____________________________  
(Typed or printed name and capacity of person signing application)
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BOLT MOBILITY CORPORATION" 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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BOLT MOBILITY
CORPORATION" WAS INCORPORATED ON THE SECOND DAY OF MAY, A.D. 2018.

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

Authentication: 203027307
Date: 07-09-18