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COVER LETTER

| TO: | Registration Secti Division of Corpo | | | | | |
|----------|---|---|------------------|--|--|--------------|
| cuni | AW GUA U | ISA, Inc. | | | | |
| SUBJ | ECT: | Name of | corporation | - must include suffix | | |
| Dear S | Sir or Madam: | | | | | |
| "Certif | | or "Certificate o | f Good Stan | Authorization to Transading" and check are sulss in Florida. | | |
| | return all correspor n Harne | ndence concernin | g this matter | to the following: | | |
| | | | Name of I | Person | | |
| AutoW | Veb, Inc. | | | | | 20 |
| | | | Firm/Com | pany | | 190 |
| 18872 | MacArthur Blvd., Ste | . 200 | | | | 20 9 00 7 28 |
| | | | Addre | SS | | 8 |
| lrvine, | CA 92612 | | | | | P13 4:1-2 |
| | | | City/State ar | ıd Zip code | - | - |
| abtlfīli | ngs@autoweb.com | | | | | ? |
| | | E-mail address: | (to be used f | or future annual report | notification) | |
| For fu | rther information co | oncerning this ma | tter, please c | all: | | |
| Kaitly | n Harne | | 949 | 862-3036 | | |
| | Name of Person | a | t (Area Code | Daytime Telep | phone Number | |
| Enclos | STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL sed is a check for the | on orations enter Circle 32301 | | MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I | Section orporations 7 | |
| | | □ \$78.75 Filing Certificate of | Fee & □ | \$78.75 Filing Fee & Certified Copy | S87.50 Filing Certificate of Certified Cop | Status & |

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.

AW GUA USA, Inc.

(Enter page of corporation: must include "INCORPORATED." "COMPANY." "CORPORATION."

| | orporation; must include "INCORPORATED," orp.," "Inc.," "Co," or "Corp.") | COMMANT, COMMONTON, | |
|------------------|---|--|---------------------|
| (If name unavail | able in Florida, enter alternate corporate name a | dopted for the purpose of transacting b | usiness in Florida) |
| Delaware | 3 | 81-0962456 | \checkmark |
| 12/29/2015 | y under the law of which it is incorporated) | (FEI number, if applic | |
| (Date | of incorporation) | (Date of duration, if other than perpetual) | |
| | y Drive, Suite 300, Tampa, Florida, 33602 | 02, F.S., to determine penalty liability) al office address) | |
| | (Current mailin | g address, if different) | 2019 001 |
| Name and stree | et address of Florida registered agent: (P.C |). Box <u>NOT</u> acceptable) | DC.T. |
| Name: | Registered Agent Solutions, Inc. | <u></u> | 28 |
| fice Address: | 155 Office Park Drive, Suite A | | / 5 |
| | Tallahassee | 32301 , Florida | |
| | (City) | (Zip code) | ř. |

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.

Adam Saldana, Asst. Secretary
(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 |
| See attached addendum. Chairman: |
| Address: |
| |
| Vice Chairman: |
| Address: |
| |
| Director: |
| Address: |
| |
| Director: |
| Address: |
| . Tudicas. |
| B. OFFICERS |
| See attached addendum. |
| Acsident. |
| Address: |
| 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. |
| Glenn E. Fuller, EVP, Chief Legal Officer and Secretary |

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

Jared R. Rowe – President, Chief Executive Officer 400 North Ashley Drive, Suite 300, Tampa, FL 33602

Glenn E. Fuller – EVP, Chief Legal Officer and Secretary 400 North Ashley Drive, Suite 300, Tampa, FL 33602

Joseph P. Hannan – EVP, Chief Financial Officer 400 North Ashley Drive, Suite 300, Tampa, FL 33602

D. Michael Beck – VP, Deputy General Counsel and Assistant Secretary 400 North Ashley Drive, Suite 300, Tampa, FL 33602

Directors:

Jared R. Rowe – Director 400 North Ashley Drive, Suite 300, Tampa, FL 33602

Glenn E. Fuller – Director 400 North Ashley Drive, Suite 300, Tampa, FL 33602

Joseph P. Hannan – Director 400 North Ashley Drive, Suite 300, Tampa, FL 33602



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

DELAWARE, DO HEREBY CERTIFY "AW GUA USA, 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-SEVENTH DAY OF SEPTEMBER, A.D. 2019.

2019 DCT 28 PH 4: 1:2

A STATE OF THE PARTY OF THE PAR

Authentication: 203680793

Date: 09-27-19



The Secretary of State of Delaware issued a certificate for AW GUA USA, INC. whose file number is 5921075 on 9/27/2019 under request number 20197116757 for authentication number 203680793

2019 OCT 28 PH 4: 1-2

