F20000001469

(Requestor's Name)		
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3/20/20

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 235215 8106160

AUTHORIZATION : Spellece

COST LIMIT : '\$' 70/00

ORDER DATE: March 19, 2020

ORDER TIME : 2:37 PM

ORDER NO. : 235215-005

CUSTOMER NO: 8106160

FOREIGN FILINGS

NAME: SLACK TECHNOLOGIES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

2670 ETT 61 L. 10: 57

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Slack Technologies, Inc.		
	ation - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good! above referenced foreign corporation to transact bu	Standing" and check are submitted to register the	ı,"
Please return all correspondence concerning this ma	atter to the following:	
Entity Compliance Legal Team		
Name	e of Person	
Slack Technologies, Inc.		
Firm/C	Company	
500 Howard Street		
A	Address	
San Francisco, CA 94105		
City/Sta	ate and Zip code	
entitycompliance@slack-corp.com		3
E-mail address: (to be us	sed for future annual report notification)	5
For further information concerning this matter, plea	ase call:) - 0
Entity Compliance Legal Team 415	579-9153	ī.: ī.:
Name of Person Area (Code Daytime Telephone Number	?; .>
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMI \$70.00 Filing Fee Certificate of Status	ENT OF STATE \$78.75 Filing Fee & \$87.50 Filing F Certified Copy Certificate of S Certified Copy	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.

Slack Technolo			
	orporation; must include "INCORPOR forp," "Inc," "Co," or "Corp,")	RATED." "COMPANY," "CORPORATION,"	
	•		
(If name unavail	able in Florida, enter alternate corporate	te name adopted for the purpose of transacting business in F	lorida)
Delaware		3 26-4400325	
(State or counti	y under the law of which it is incorpora	rated) 26-4400325 (FEI number, if applicable)	
(Date	of incorporation)	5. N/A (Date of duration, if other than perpetual)	
N/A			
	(Date first transacted bus	usiness in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 &	& 607.1502. F.S., to determine penalty liability)	
500 Howard Stre	et, San Francisco, CA 94105		
	(Princi	1 - 6	
a ,	(cipal office <u>street</u> address)	
Same as above			
Same as above		nt mailing address, if different)	
	(Сигтеп	nt mailing address, if different)	
	(Curren et address of Florida registered agen	nt mailing address, if different)	200
	(Сигтеп	nt mailing address, if different)	2020 11
. Name and stree	(Curren et address of Florida registered agen	nt mailing address, if different)	2028 : 11
Name and street	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street	nt mailing address, if different) nt: (P.O. Box NOT acceptable)	3 19
. Name and stree	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street Tallahassee	nt mailing address, if different) nt: (P.O. Box NOT acceptable) Florida 32301	3 19
. Name and stree	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street	nt mailing address, if different) nt: (P.O. Box NOT acceptable)	3 19
. Name and stree Name: Office Address:	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance:	nt: (P.O. Box NOT acceptable) Florida 32301 (Zip code)	45:01.77 61 U.S.
Name and streen Name: Office Address: Registered against against been name	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: ted as registered agent and to acceptance	nt: (P.O. Box NOT acceptable) Florida 32301 (Zip code)	1. 19 1. 10: 24 at the pla
Name and street Name: Office Address: Registered agraving been namesignated in this	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to acceptangelication, I hereby accept the ap	nt mailing address, if different) nt: (P.O. Box NOT acceptable) , Florida 32301 (Zip code) pt service of process for the above stated corporation of ppointment as registered agent and agree to act in this	at the pla
Name and street Name: Office Address: Registered aglaving been namesignated in this	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to acceptangelication, I hereby accept the ap	nt mailing address, if different) nt: (P.O. Box NOT acceptable) , Florida 32301 (Zip code) pt service of process for the above stated corporation of ppointment as registered agent and agree to act in this atutes relative to the proper and complete performance.	at the pla
Name and street Name: Office Address: Registered againg been namesignated in this	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to accept application, I hereby accept the apomply with the provisions of all states	nt mailing address, if different) nt: (P.O. Box NOT acceptable) , Florida 32301 (Zip code) pt service of process for the above stated corporation of ppointment as registered agent and agree to act in this atutes relative to the proper and complete performance.	at the pla
Name and street Name: Office Address: Registered aginary been namelesignated in this surther agree to cond I am familian	(Curren et address of Florida registered agen Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to accept application, I hereby accept the apomply with the provisions of all states	nt mailing address, if different) nt: (P.O. Box NOT acceptable) , Florida 32301 (Zip code) pt service of process for the above stated corporation of ppointment as registered agent and agree to act in this atutes relative to the proper and complete performance.	at the pla

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.

See attached. All are Directors.

A. DIRECTORS □ Chairman Name: □ Chairman Name: _____ □Vice Chairman Address: ______ □ Vice Chairman Address: _____ □Director ☐ Director □President □President □Vice President __ ☐ Vice President \Box Treasurer ☐ Secretary ☐ Treasurer □ Secretary ☐Other ____ □Other ______ □Other _____ □Other _____ Name: ____ □Chairman □Chairman Name: ____ □ Vice Chairman Address: _____ □ Vice Chairman Address: _____ □Director □ Director □ President □ President ☐ Vice President ☐ Vice President ☐ Secretary □Treasurer □ Secretary □Treasurer □Other _____ □Other ______ ☐ Other _____ □Other _____ Name: _____ ☐ 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. Signature of Director on 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.

13. David Schellhase, Secretary

SLACK TECHNOLOGIES, INC. DIRECTOR INFORMATION

Daniel Stewart Butterfield	500 Howard St., San Francisco, CA 94105
Andrew Braccia	500 Howard St., San Francisco, CA 94105
John O'Farrell	500 Howard St., San Francisco, CA 94105
Michael McNamara	500 Howard St., San Francisco, CA 94105
Sarah Friar	500 Howard St., San Francisco, CA 94105
Edith Cooper	500 Howard St., San Francisco, CA 94105
Graham Smith	500 Howard St., San Francisco, CA 94105
Sheila B. Jordan	500 Howard St., San Francisco, CA 94105



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

DELAWARE, DO HEREBY CERTIFY "SLACK TECHNOLOGIES, 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 NINETEENTH DAY OF MARCH, A.D. 2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SLACK TECHNOLOGIES, INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2009.

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

12:01:14 61 c. 11:33Z



Authentication: 202618931

Date: 03-19-20