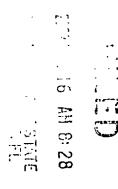
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(City/State	Zip/Phone #)
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(Business	Entity Name)
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2022 FEB 16 PH 1:5

S. HAWKES

FEB ... 2021

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

02/16/22

NAME: QUANTUM AUTOMOTIVE INTELLIGENCE INC.

TYPE OF FILING: APPLICATION

COST:

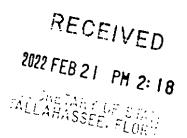
87.50

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: **FCA000000015**

AUTHORIZATION: ABBIE/PAUL HODGE





February 17, 2022

FLORIDA FILING

SUBJECT: QUANTUM AUTOMOTIVE INTELLIGENCE INC.

Ref. Number: W22000019472

We have received your document for QUANTUM AUTOMOTIVE INTELLIGENCE INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

There is no attachment of the Registered Agents signiture.,

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

Suzanne Hawkes Regulatory II

Letter Number: 622A00003916

Manic you.

Plase Keep original fle derre

COVER LETTER

TO:		stration Section of Corpo						
SUBJ	ECT.	Quantum A	utomotive Intellig	ence Inc.				
1,010	DÇI.		Name	of corporation	n - m	ust include suffix		
Dear S	ir or M	ladam:						
"Certif	ficate o	f Existence,	n by For c ign Co ' or "Certificate corporation to tr	of Good Sta	រាding	horization to Transact 3" and check are subm 1 Florida.	t Bus nitted	iness in Florida," I to register the
Please	return	all correspo	ndence concerni	ng this matte	er to t	he following:		
James l	Navin							
	-			Name o	Pers	son		· · · · · · · · · · · · · · · · · · ·
Quantu	ım Auto	motive Intell	gence Inc.					
	-			Firm/Co	npan	у		
2125 B	iscayne	Boulevard, S	uite 500A					
				Add	ross			
Miami,	.FL 33	137						
_				City/State	and Z	ip code		
finance	:@drzm)	tumautoiq.cox						
			E-mail address	: (to be used	for f	uture annual report no	otific	ation)
For fur	ther in	formation co	ncerning this m	atter, please	call:			
James i	Vavin			at (;	308-1701		
Name of Person		Area Co	Code Daytime Telephone Number		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		tions		
Plcase r	nake ch	eck payable t	e following amo o: FLORIDA DI S78.75 Filin Certificate o	EPARTMEN g Fce &	□ \$7	STATE 8.75 Filing Fee & entified 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.

(If name unavai	lable in Florida, enter alternate corporate name a	dopted for the purpose of transacting	g business in I	Florida)	-	
Delaware						
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)			-	
May 13, 2020	Ş					
(Date	of incorporation)	(Date of duration, if other t	than perpetual))	_	
lanuary 1,2022						
	(Date first transacted business in		· · · ·		_	
196 Di D	(SEE SECTIONS 607.1501 & 607.150	12, F.S., to determine penalty trabili	ту)			
125 Biscayne B	oulevard, Suite 500A, Miami, FL 33137		<u> </u>		_	
	(Principal offic	e <u>street</u> address)				
					-	
	(Current mailing	address, if different)				
	(Current mailing	address, if different)				
Name and <u>stre</u>	(Current mailing et address of Florida registered agent: (P.O.			~ 3		
Name and <u>stre</u> Name:	·		:	e 3 -		
Name:	et address of Florida registered agent: (P.O.		:			
Name:	et address of Florida registered agent: (P.O. Paracorp Incorporated 155 Office Plaza Drive, 1st Floor	Box NOT acceptable)	; ,			
Name:	et address of Florida registered agent: (P.O. Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee	Box NOT acceptable) , Florida 32301	:	2 ' .:6 AH	. ~ . ~ . ~ . ~ . ~ . ~ . ~ . ~ . ~ . ~	
Name:	et address of Florida registered agent: (P.O. Paracorp Incorporated 155 Office Plaza Drive, 1st Floor	Box NOT acceptable)	SIA	3 18 14 91 7 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2		
Name: ice Address:	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City)	Box NOT acceptable) , Florida 32301	STATE	7 1:6 AH 8:28		
Name: ice Address: Registered ag	et address of Florida registered agent: (P.O. Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee	Box NOT acceptable)	• • • •	ω	· · · · · · · · · · · · · · · · · · ·	
Name: ice Address: Registered agoing been nanignated in this	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) ent's acceptance: sed as registered agent and to accept services application, I hereby accept the appointment.	Box NOT acceptable) Florida 32301 (Zip code) e of process for the above stated and agree agree and agree agree and agree agree agree and agree agr	i corporation e to act in th	at the is cap	aclt	
Name: ice Address: Registered ag ving been nan ignated in this her agree to c	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) ent's acceptance: ted as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes recommends.	Box NOT acceptable) , Florida 32301, Elorida (Zip code) e of process for the above stated and agreelative to the proper and complete	i corporation e to act in th	at the is cap	aclt	
Name: ice Address: Registered ag ving been nan ignated in this her agree to c	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) ent's acceptance: sed as registered agent and to accept services application, I hereby accept the appointment.	Box NOT acceptable) , Florida 32301, Elorida (Zip code) e of process for the above stated and agreelative to the proper and complete	i corporation e to act in th	at the is cap	aclt	
Name: ice Address: Registered agving been nanignated in this	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) ent's acceptance: ted as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes recommends.	Box NOT acceptable) , Florida 32301, Elorida (Zip code) e of process for the above stated and agreelative to the proper and complete	i corporation e to act in th	at the is cap	aclt	
Name: fice Address: Registered ag ving been nan ignated in this ther agree to c	Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee (City) ent's acceptance: ted as registered agent and to accept service application, I hereby accept the appointment of the provisions of all statutes recommends.	Box NOT acceptable) , Florida 32301, Elorida (Zip code) e of process for the above stated and agreelative to the proper and complete	i corporation e to act in th	at the is cap	aclt	

under the law of which it is incorporated.

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

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS						
Chairman	Name: Oscar Mura	□ Chairman	Name:			
☐ Vice Chairman	Address: 6823 Spyglass Lane	☐Vice Chairman	Address: 851 NE 1st Ave			
□Director	Rancho Santa Fe, CA 92067	圖Director	Unit 3001			
□President		□ President	Miami, FL 33132			
□ Vice President		□ Vice President				
☐ Secretary	OTreasurer	☐ Secretary	☐Treasurer			
□Other	Other	Other	[]Other			
□Chairman □Vice Chairman ■Director	Name: Kris Ross Address: 851 NE 1st Ave Unit 1805	□Chairman □Vice Chairman □Director	Name: Sean Marsh Name: 1450 Frazec Road Suite 602 Address: San Dicgo, CA 92108			
President	Miami, FL 33132	□President				
□Vice President		☐ Vice President				
Secretary	C) Treasurer	☐ Secretary	☐Treasurer			
ElOther		□Other	Other			
□Chairman □Vice Chairman ■Director	Ann Arbor, MI 48108	□Chairman □Vice Chairman □Director	Name: Graye Wolfe Name: 1409 N. Main St. Address: Meridian, ID 83642			
□President		[]President				
□Vice President		☐ Vice President				
Secretary	☐ Treasurer	Secretary	☐Treasure r			
□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. James Navin CFO						
13. James Navir						

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 2/11/2022

ENTITY NAME: QUANTUM AUTOMOTIVE INTELLIGENCE INC.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "QUANTUM AUTOMOTIVE INTELLIGENCE 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 SIXTEENTH DAY OF FEBRUARY,

A.D. 2022.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QUANTUM AUTOMOTIVE INTELLIGENCE INC." WAS INCORPORATED ON THE THIRTEENTH DAY OF MAY, A.D. 2020.

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

Authentication: 202676380

Date: 02-16-22

7943157 8300 SR# 20220538299