Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION

Realog Inc

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

S. ROBERTS

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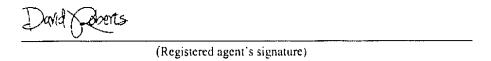
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

Realog Inc.			
	corporation; must include "INCORPORATED," 'Corp." "Inc." "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavai	lable in Florida, enter alternate corporate name ad	opted for the purpose of transacting b	ousiness in Florida)
Delaware 2.	3.		
2. (State or country under the law of which it is incorporated)		(FEI number, if applicable)	
4. 01/24/2023	5		
(Dat	e of incorporation) 5.	(Date of duration, if other tha	in perpetual)
6.			
v	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) 2, F.S., to determine penalty liability))
7901 4th St N S	TE 300 St. Petersburg FL 33702		
/·	(Principal office	street address)	.==-
7901 4th St N S	TE 300 St. Petersburg FL 33702		
	(Current mailing	address, if different)	2023
8. Name and stre	eet address of Florida registered agent: (P.O.	Box NOT acceptable)	·
Name:	Registered Agents Inc		(2) (3)
Office Address:	7901 4th St N STE 300	_	ويون د ب سر.
	St. Petersburg	— 33702 . Florida	ထ္ သ
	(City)	(Zip code)	ယ

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.



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.

Zoho Sign Documen, ID: 3067033C-VXHQKi6VGJEQZNZS IAKYNEAHWFQ1MJSMYULE5C9YFS

A. DIRECTORS Scott Phillips Anvesh Chakravartula □ Chairman □ Chairman □Vice Chainnan Address: □Vice Chairman Address: ___ 7901 4th St N STE 300 7901 4th St N STE 300 (XDirector □ Director St. Petersburg, FL 33702 St. Petersburg, FL 33702 ☐ President □Vice President □Vice President □ Secretary □ Treasurer **EXSecretary** □Treasurer Other _____ □Other _____ □Other _____ □Other _____ Thirumala Reddy Kumbum Name: □ Chairman Chairman □Vice Chairman Address: □ Vice Chairman Address: 7901 4th St N STE 300 □ Director. □ Director St. Petersburg, FL 33702 ☐President □ President □Vice President □Vice President ___ ☐Secretary **⊠**Treasurer □Secretary □Treasurer □Other _____ Other _____ □Other _____ Other Name: □Chairman □ 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.

12. Anneshich

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.

-President 13. Anvesh Chakravartula

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REALOQ 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 THIRD DAY OF JUNE, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REALOQ INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JANUARY, A.D. 2023.

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

7254240 8300 SR# 20232655113

You may verify this certificate online at corp.delaware gov/authiver, shtml

Authentication: 203477538

Date: 05-03-23