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JUN 29 1973 C Brumbiey

CT CORP

(850)656-4724 3458 Lakeshore Drive, Tallahassee, FL 32312

06/28/2023

W.P. Verifier _____

D	ate:	06/28/2023	- w: () W
		Acc#I20160000072	4 () - W
Name:	Kaleyra US	3 Inc.	
Document #:			
Order #:	14858215		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good		·	
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Thank you!

COVER LETTER

	stration Section ion of Corporations				
SURJECT	Kaleyra US, Inc.				
John Lett.	Na	me of corporation	n - must	include suffix	
Dear Sir or M	ladam:				
"Certificate of	"Application by Foreign of Existence," or "Certificated foreign corporation	cate of Good Star	nding" a	ind check are subi	t Business in Florida," mitted to register the
Please return	all correspondence conc	erning this matte	r to the	following:	
DawnMarie S	tump				
		Name of	Person		
Thompson Hi	ne LLP				
•		Firm/Cor	npany		
41 South High	Street, Ste. 1700				
		Addı	ress		
Columbus, Ol	nio 43215				
• • • •	4/8-	City/State	and Zip	code	
dawnmarie.stu	ımp@thompsonhine.com				
	E-mail add	lress: (to be used	for futu	re annual report n	otification)
For further in	nformation concerning th	is matter, please	call:		
DawnMarie S	tump	at (469 \	-3261	
Nan	ne of Person	Area Coo	de	-3261 Daytime Telepl	none Number
Regi Divi: The 2415	EET/COURIER ADDI stration Section sion of Corporations Centre of Tallahassee N. Monroe Street, Suite shassee, FL 32303			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
	_	A DEPARTMEN	□ \$78.7	FATE 75 Filing Fee & fied Copy	S87.50 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 unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting	g business in Florida)
Delaware	3. ^{4.}	5-3817586	
(State or country November 15, 2	y under the law of which it is incorporated) 011	(FEI number, if ap	
(Date	of incorporation)	(Date of duration, if other t	han perpetual)
June 27, 2023			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)		ty)
1040 Crown Poin	te Pkwy, Suite 540, Atlanta, GA 30338		·
	(Principal office	street address)	
	(Current mailing	address, if different)	~ ~
Name and stree	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	SECRETA
Name and street Name;	CT Corporation System	Box <u>NOT</u> acceptable)	SECKETARY OF ALL LAHASSES.
Name:		Box <u>NOT</u> acceptable)	
Name:	CT Corporation System	Box <u>NOT</u> acceptable), Florida	P23 JUN 28 AM 10: 32 SECRETARY OF STATE FALLAHASSEE, FLOWIN
Name:	CT Corporation System 1200 South Pine Island Road		

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.

A. DIRECTORS Giacomo Dall'Aglio Dario Calogero Name: □Chairman Name: □ Chairman 1040 Crown Pointe Pkwy. 1040 Crown Pointe Pkwy. ☐ Vice Chairman Address: □Vice Chairman Address: __ Suite 540 Suite 540 ■ Director Director Atlanta, GA 30338 Atlanta, GA 30338 □President □ President □Vice President ☐ Vice President ☐ Treasurer ☐ Secretary □ Treasurer ☐ Secretary □Other _____ ☐ Other _____ ☐ Other Other ☐ Chairman Name: ______ □ Chairman Name: Address: □Vice Chairman Address: ☐Vice Chairman □ Director Director ☐ President □ President □ Vice President □Vice President _____ □Treasurer ☐ Secretary □ Secretary ☐ Treasurer □ Other ______ Other ☐ Other _____ ☐ Other _____ Name: ______ Name: Chairman Chairman □Vice Chairman Address: □ Vice Chairman Address: Director □ Director President □ President □Vice President _____ ☐ Vice President ☐ Secretary ☐Treasurer ☐ Secretary ☐ Treasurer □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. /s/ Dario Calogero 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

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 of 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.

Page 1



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

DELAWARE, DO HEREBY CERTIFY "KALEYRA US 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 EIGHTH DAY OF JUNE, A.D. 2023.

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

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

and some delayage sow/auth

Authentication: 203510772

Date: 06-08-23