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CT CORP

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

D	ate:	06/24/2025	- 4:1 DW
		Acc#I20160000072	
Name:	Prophecy (CRE, Inc.	
Document #:			
Order #:	16386192		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
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Thank you!

COVER LETTER

	tration Section ion of Corporations			
SUBJECT:	Prophecy CRE, Inc.			
3000001.	Name of o	corporation - 1	nust include suffix	
Dear Sir or M	adam:			
"Certificate o	"Application by Foreign Corport f Existence," or "Certificate of ced foreign corporation to tran	Good Standii	ng" and check are submitte	isiness in Florida," ed to register the
Please return	all correspondence concerning	this matter to	the following:	
Henry Yen				
~		Name of Pe	rson	_
Wilson Sonsin	i Goodrich & Rosati			
		Firm/Compa	ny	
650 Page Mill	Road			
·		Address		
Palo Alto, CA	94304			
	(City/State and	Zip code	
hyen@wsgr.co				
	E-mail address: (to be used for	future annual report notif	ication)
For further in	formation concerning this matt	ter, please cal	l:	
Henry Yen	ai	650	Daytime Telephone Number	
Nam	e 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 Please make cl □ \$70.00 Fil	check for the following amounteek payable to: FLORIDA DEP ing Fee	ARTMENT C Fee & \square !	OF STATE \$78.75 Filing Fee & Certified Copy	37.50 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.

(Enter name of corporation; must include "INCORPORATEI "Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")	
	ne adopted for the purpose of transacting business in Florida)
(If name unavailable in Florida, enter alternate corporate nan	
Delaware	3 99-1800477
2. Delaware (State or country under the law of which it is incorporated)	(FEI number, if applicable)
(Date of incorporation)	5(Date of duration, if other than perpetual)
6	
	s in Florida, if prior to registration) 1.1502, F.S., to determine penalty liability)
7. 450 Hayes Street Unit 3G, San Francisco, CA 94102	
	office street address)
(Current mai	iling address, if different)
0.01 1.00 1.00 1.00 1.00 1.00 1.00 1.00	O. O. Day NOT accomtable)
8. Name and street address of Florida registered agent: (1	P.O. Box NOT acceptable)
Name: Registered Agents Inc.	
Office Address: 7901 4th St N Ste 300	
St. Petersburg (City)	. Florida 33702
(City)	(Zip code)
9. Registered agent's acceptance:	2025
Having been named as registered agent and to accept sedesignated in this application, I hereby accept the appoin further agree to comply with the provisions of all statute and I am familiar with and accept the obligations of my	rvice of process for the above stated corporation the place interest has registered agent and agree to act in this capacity. It is relative to the proper and complete performance of my little position as registered agent.
By: David Roberts (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.

Docusign Envelope ID: EE89CEA2-FD2E-4140-AC34-9A175F42CDAC A. DIRECTORS Name: Andrew Fang Name: ☐ Chairman □ Chairman 450 Hayes Street Unit 3G □ Vice Chairman Address: □Vice Chairman San Francisco, CA 94102 **■** Director □Director □President □ President □ Vice President □Vice President □Treasurer ☐ Secretary ☐Treasurer Secretary ... ■Other _ □Other ____ □Other _____ Name: ______ □Chairman Name: _____ □ Chairman ☐ Vice Chairman Address: □ Vice Chairman Address: ______ □ 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 □ Vice President □Vice President __ □Treasurer ☐ Secretary □ 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.

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.

Andrew Fang, Chief Executive Officer

Page 1

Delaware

The First State

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE

OF DELAWARE, DO HEREBY CERTIFY "PROPHECY CRE, 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-FOURTH DAY OF JUNE, A.D.

2025.

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.

Charuni Patibanda-Sonchez, Secretary of State
Authentication: 204024939

C. G. Sanchey

Date: 06-24-25