

F21000006554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

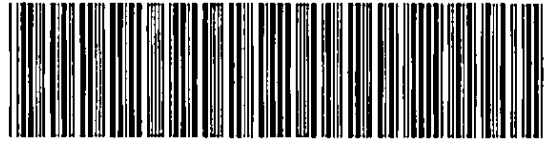
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/03/21--01040--024 **70.00

FILED
2021 NOV -8 PM 2:24
CLERK OF DISTRICT COURT
STATE OF FLORIDA

S. HAWKES
NOV - 8 2021

The CommLaw Group
1430 Spring Hill Road, Suite 315
Tysons, VA 22102



November 5, 2021

Division of Corporations
Attn: New Filing Section
P.O. Box 6327
Tallahassee, FL 32314 United States

Re: Weave Communications, Inc. - Corporate Registration (FL)

Attention -

Please accept this Corporate Registration (FL) filing on behalf of Weave Communications, Inc..

The Company has enclosed the appropriate filing fee of \$70.00 and a Certificate of Good Standing from its formation state of Delaware.

Please do not hesitate to contact the undersigned directly with any questions about this application at kmh@compliancegroup.com.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read "Karen M. Hyde".

Karen Hyde

On behalf of Weave Communications, Inc.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Weave Communications, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Karen Hyde

Name of Person

The Commpliance Group

Firm/Company

1430 Spring Hill Road, Ste 315

Address

McLean, VA 22102

City/State and Zip code

kmh@commpliancegroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Hyde

at (703) 714-1306

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 DEPARTMENT OF STATE**

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified 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.*

1. Weave Communications, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 26-3302902

(FEI number, if applicable)

4. 12/05/2013

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. Upon Registration

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1331 W Powell Way, Lehi, Utah 84043

(Principal office street address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation Systems

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

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.



C T Corporation System by Rachel O'Connor Assistant Secretary

(Registered agent's signature)

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.

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

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CLERK OF STATE
TALLAHASSEE, FL

A. DIRECTORS

☒ Chairman Name: Roy Banks
☐ Vice Chairman Address: 1331 W Powell Way
☐ Director Lehi, Utah 84043
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Wendy Harper
☐ Vice Chairman Address: 1331 W Powell Way
☐ Director Lehi, UT 84043
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

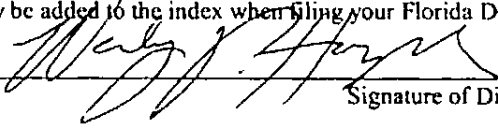
☐ Chairman Name: Alan Taylor
☐ Vice Chairman Address: 1331 W Powell Way
☐ Director Lehi, UT 84043
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Chief Financial Officer ☐ Other _____

☐ Chairman Name: Stuart Charles Harvey Jr.
☐ Vice Chairman Address: 1331 W Powell Way
☒ Director Lehi, UT 84043
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Blake G Modersitzki
☐ Vice Chairman Address: 2750 E. Cottonwood Parkway, Suite 600
☒ Director Salt Lake City, UT 84004
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Tyler Crammer Newton
☐ Vice Chairman Address: c/o Catalyst Investors, 711 Fifth Avenue, Suite 600
☒ Director New York, NY 10022
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ 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.

13. Wendy Harper / Secretary
(Typed or printed name and capacity of person signing application)

Additional Directors

Tyler Crammer Newton
c/o Catalyst Investors
711 Fifth Avenue, Suite 600
New York NY 10022

David Richard Silverman
Crosslink Capital, 2180 Sand Hill Road, Suite
200 Menlo Park, CA 94025

Deborah Beachner Tomlin
1331 W Powell Way
Lehi, Utah 84043

Brett White
1331 W Powell Way
Lehi, Utah 84043

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WEAVE COMMUNICATIONS, 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 FIFTEENTH DAY OF OCTOBER, A.D. 2021.

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.



5849313 8300

SR# 20213521245

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 204420308

Date: 10-15-21