

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000001771

Entity Name: DIGITAL OPENDOOR INSURANCE SERVICES LLC**Current Principal Place of Business:**ATTN: LEGAL OPERATIONS
ONE POST STREET, 11TH FLOOR
SAN FRANCISCO, CA 94105**Current Mailing Address:**ATTN: LEGAL OPERATIONS
ONE POST STREET, 11TH FLOOR
SAN FRANCISCO, CA 94105 US**FEI Number:** 30-1163899**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN STREET STE 4
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	SM M
Name	OPENDOOR LABS INC.
Address	ATTN: LEGAL OPERATIONS ONE POST STREET, 11TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94105
Title	MGR
Name	BURKE, CLAIRE
Address	ATTN: LEGAL OPERATIONS ONE POST STREET, 11TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94105

Title	MGR
Name	BONNEY, BRADFORD
Address	ATTN: LEGAL OPERATIONS ONE POST STREET, 11TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94105
Title	AUTHORIZED SIGNER
Name	WU, ERIC
Address	ATTN: LEGAL OPERATIONS ONE POST STREET, 11TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94105

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ERIC WU**AUTHORIZED SIGNER****04/09/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date