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FOREIGN PROFIT/NONPROFIT CORPORATION MOBPARTNER, INC.

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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.

	ble in Florida, enter alternate corporate name ad		ing business in Florida)
DELAWAR	3	41-2282756	
(State or country	y under the law of which it is incorporated)	(FEI number, if a	ipplicable)
. <u>09/20/201</u>		(Date of duration, if other	e than nametical)
•	of incorporation) 1/12/15	(Dam of directon' it orne	er than perpertiza)
Mal	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150 Partner, Inc. 535 Mission Street 14th	2, F.S., to determine penalty liab	
,		office address)	
	(Current mailing	address, if different)	
. Name and stree	t address of Florida registered agent: (P.O. Incorporating Services, Ltd.	Box NOT acceptable)	2015 DEC SECRETY
office Address:	1540 Glenway Drive		22 / SSEE
	Tallahassee	, Florida32301	
	(City)	(Zip code)	DE OL
	ent's acceptance: ed as registered agent and to accept service	e of process for the above sta ent as registered agent and a lative to the proper and comp	ted corporation at the p gree to act in this capac

^{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.

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11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: ____ Vice Chairman: _____ Address: _ Director. Address: Director: B. OFFICERS Djamel Agaoua President: 535 Mission Street 14th Floor San Francisco, CA 94105 Address: Vice President: ___ Address: Secretary: Djamel Agaoua 535 Mission Street 14th Floor San Francisco, CA 94105 Address: Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Djamel Agaoua President, CEO, CFO, Secretary

(Typed or printed name and capacity of person signing application)

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MOBPARTNER, 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-SECOND DAY OF DECEMBER, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MOBPARTNER, INC." WAS INCORPORATED ON THE TWENTIETH DAY OF SEPTEMBER, A.D. 2013.

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

5402786 8300

SR# 20151489577

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

YNSKK.

Authentication: 10669063

Date: 12-22-15