F1600000131

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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To FEB IT THE TO SUFFICIENCY OF FILMS

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2016

CORPORATION SERVICE COMPANY - COURTNEY WILLIAMS

SUBJECT: DROPBOX, INC. Ref. Number: W16000001991

We have received your document for DROPBOX, INC. and the authorization to debit your account in the amount of \$78.75. However, the document has not been filed and is being returned for the following:

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$950.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 716A00000822

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : I2000 | 0(| 000 | 00 | 0.0 | 01 | 95 |
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REFERENCE : 013364 7876146

AUTHORIZATION : Smell of and

COST LIMIT : \$\(\frac{1}{1}\)0,28.75

ORDER DATE: February 11, 2016

ORDER TIME : 12:12 PM

ORDER NO. : 013364-005

CUSTOMER NO: 7876146

FOREIGN FILINGS

NAME: DROPBOX, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

| TO: | Registration Secti Division of Corpo | | | | |
|---------------|--|--|-------|---|--|
| SUBJ | Dropbox, In | c. | | | |
| 0000 | | Name of corpora | tion | - must include suffix | |
| Dear S | Sir or Madam: | | | | |
| "Certi | ficate of Existence,' | n by Foreign Corporation or "Certificate of Good corporation to transact bu | Stan | ding" and check are sub | |
| Pleaso | return all correspor | ndence concerning this m | atter | to the following: | |
| Martii | a Plaza | | | | |
| | | Name | of F | 'erson | |
| Dropb | ox, Inc. | | | | |
| | train to the second sec | Firm/ | Com | oany | |
| 185 B | erry Street, Stc 400 | | | | |
| | | ۸ | ddre | ss | |
| San Fr | rancisco, CA 94107 | | | | |
| | | City/Sta | te ar | d Zip code | |
| filing- | notices@dropbox.com | | | | |
| | * | E-mail address: (to be us | sed f | or future annual report | notification) |
| For fu | rther information co | oncerning this matter, plea | ise c | all: | |
| Martir | na Plaza | 415 | | 857 6934 | |
| | Name of Person | at (| Code | Daytime Telep | hone Number |
| | STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3 | on orations enter Circle 12301 | | MAILING A Registration S Division of Co P.O. Box 632 Tallahassec, I | section orporations 7 |
| Enclos | sed is a check for the | e following amount: | | | |
| □ \$ 7 | 0.00 Filing Fee 1 | \$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.

| (State or country under the law of which it is incorporated) (State or country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) Same. (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Name: Tallahassee (City) Florida (Zip code) | (If name unavailal | ine, Inc. ole in Florida, enter alternate corporate na | me a | adopted for the purpose of transact | ing busine | ss in Flo | rida) | |
|--|---------------------------------------|---|--------------------------------------|-------------------------------------|---|------------------|---|--|
| (State or country under the law of which it is incorporated) 5/8/07 (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 185 Berry Street, Ste 400, San Francisco, CA 94107 USA (Principal office address) Same. (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Name: 1201 Hays Street Tallahassee | DE, USA | | | | | | | |
| (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 185 Berry Street, Ste 400, San Francisco, CA 94107 USA (Principal office address) Same. (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Since Address: Tallahassee | (State or country | under the law of which it is incorporated) | porated) (FEI number, if applicable) | | | | | |
| (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 185 Berry Street, Ste 400, San Francisco, CA 94107 USA (Principal office address) Same. (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Sorry Tallahassee | | | 5 | perpetual | | | | |
| (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 185 Berry Street, Ste 400, San Francisco, CA 94107 USA (Principal office address) Same. (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Name: 1201 Hays Street Tallahassee Tallahassee Florida 32301 Florida | (Date of | of incorporation) | ٥. | (Date of duration, if oth | er than per | petual) | *************************************** | |
| (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 185 Berry Street, Ste 400, San Francisco, CA 94107 USA (Principal office address) Same. (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company CORPORTION CORPO | | | | | | | | |
| (Principal office address) Same. (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Florida 1201 Hays Street Tallahassee , Florida 32301 Tallahassee , Florida 32301 | - | | | | ::::::::::::::::::::::::::::::::::::::: | | | |
| (Current mailing address, if different) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Name: 1201 Hays Street Tallahassee , Florida 32301 REFERENCE STANDARD STAND | 185 Berry Street, S | | 7.13 | 502, r.s., to determine penalty had | шцу | | | |
| Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company Name: 1201 Hays Street Tallahassee , Florida 32301 R 57 | | | | al affice address) | | | | |
| Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company I201 Hays Street Tallahassee Tallahassee Florida Samuel A Samuel Tallahassee Florida Samuel Tallahassee Florida Samuel Tallahassee Florida Samuel Tallahassee Florida Samuel Tallahassee Tallahassee Florida | Same. | (rn | ncip | ai office address) | | | | |
| Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company 1201 Hays Street Tallahassee , Florida 32301 STANDING TOTAL | | (Current m | ailin | ag address if different) | | | | |
| Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Company 1201 Hays Street Tallahassee Tallahassee Florida 32301 Florida | | (Current in | 41111 | ig address, if different) | | 201 | | |
| Name: Corporation Service Company Corporation Service Corpora | Name and street | address of Florida registered agent: (| (P.C |). Box NOT acceptable) |) | | | |
| Name: 1201 Hays Street | | | (| | | | ***** 1.594 | |
| Tallahassee , Florida 32301 | Name: | | | | | | , , | |
| Tallahassee , Florida 32301 | ffice Address: | 1201 Hays Street | | | | \triangleright | | |
| (City) (Zip code) | | Tallahassee | | 32301 | ORI ORI | | | |
| | | (City) | | | D.E. | 80 | | |
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| | Registered agei aving been name | | | | | | | |
| iving been named as registered agent and to accept service of process for the above stated corporation at the pl Signated in this application, I hereby accept the appointment as registered agent and agree to act in this capaci Ther agree to comply with the provisions of all statutes relative to the proper and complete performance of my | iving been name signated in this o | application, I hereby accept the appoint | | | | | | |

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. Names and business addresses of officers and/or directors: A. DIRECTORS **Andrew Houston** Chairman: 185 Berry Street, Ste 400, San Francisco, CA 94107 Address: Arash Fordowsi Vice Chairman: 185 Berry Street, Ste 400, San Francisco, CA 94107 Address: Director: Address: B. OFFICERS Andrew Houston President: 185 Berry Street, Stc 400, San Francisco, CA 94107 Address: Vice President: 185 Berry Street, Ste 400, San Francisco, CA 94107 Address: Address: Vanessa Wittman, CFO Treasurer: 185 Berry Street, Ste 400, San Francisco, CA 94107 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. Vanessa Wittman, Chief Financial Officer

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

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DROPBOX, 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 ELEVENTH DAY OF JANUARY, A.D. 2016.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DROPBOX, INC."

WAS INCORPORATED ON THE EIGHTH DAY OF MAY, A.D. 2007.

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

Authentication: 201653108

Date: 01-11-16

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