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(Re	questor's Name)	
(Ad	dress)	
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Certified Copies	_ Certificates	of Status
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ONETAKY OF STATE LLAHASSEE, FLORID

11 25 PM 5:

S. WARREN JUN 2 9 2017

COVER LETTER

	stration Sec					
SUBJECT:	View, Inc					
		Name	of corporation	n - must i	nclude suffix	
Dear Sir or M	/ladam:					
"Certificate o	of Existence		e of Good Sta	nding" a	nd check are su	act Business in Florida," bmitted to register the
Please return Finance Depa	-	ondence concern	ing this matte	er to the f	following:	
			Name of	Person		
View, Inc.						
	-		Firm/Cor	npany		
195 South Mi	lpitas Blvd					
			Addı	ress		
Milpitas, CA	95035	`-				
			City/State a	and Zip c	ode	
tax@viewglas	ss.com					
		E-mail addres	s: (to be used	for futur	e annual report	notification)
For further ir	nformation	concerning this r	natter, please	call:		
Finance Depa	rtment		408	263-		
Nam	ne of Person	1	at (Area Coo) de	Daytime Telep	phone Number
Regi Divis Clifto 2661	stration Sec sion of Cor on Building	porations 3 Center Circle	SS:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, S	Section Corporations 17
Enclosed is a	check for	the following am	ount:			
□ \$70.00 Fi	ling Fee	\$78.75 Filir Certificate			5 Filing Fee & led 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.

View, Inc.

1.	(Enter name of c	orporation; must include "INCORPORATED," "	COMPANY," "CORPORATION,"		
	"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")			
	(If name unavails	able in Florida, enter alternate corporate name ado	opted for the purpose of transacting bu	siness in Florida)	
2.	Delaware	3.	0-0414899		
	(State or countr	y under the law of which it is incorporated)	(FEI number, if applica	able)	
4.	04/09/2007	5.			
	(Date	of incorporation) 5.	(Date of duration, if other than	perpetual)	
6.					
		(Date first transacted business in F			
	195 South Milnit	(SEE SECTIONS 607.1501 & 607.1502 as Blvd, Milpitas, CA 95035	t, F.S., to determine penalty liability)		
7.		·			
	105 Courth Milair	` '	office address)		
		tas Blvd, Milpitas, CA 95035			
		(Current mailing a	address, if different)	7 J	
Q	Name and stree	et address of Florida registered agent: (P.O.)	Boy NOT acceptable)	JUN 26	T
0.	Name and street	·	Box NOT acceptable)		$\overline{}$
	Name:	C T Corporation System			
O:	ffice Address:	1200 South Pine Island Road		FL0	
	mee / laaress.	Plantation		25 S	
		(6)	, Florida	> · · · ·	
		(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.

Jennifer Quinn, 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.

li. Nan	nes and business addresses of officers and/or directors:	
A. DIR	ECTORS	
Chairman	Tom Leppert	_
	195 South Milpitas Blvd, Milpitas, CA 95035	
Vice Cha	irman:	
Address:		
Director:	Fahri Diner	
	195 South Milpitas Blvd, Milpitas, CA 95035	TAILAIL
Director:	Jeff Evenson	126
	195 South Milpitas Blvd, Milpitas, CA 95035	
B. OFF	ICERS	⊋m ∞
President	Rao Mulpuri	
	195 South Milpitas Blvd, Milpitas, CA 95035	
Vice Pres	James D. Fay ident: 195 South Milnites Plant Milnites CA 95935	
	195 South Milpitas Blvd, Milpitas, CA 95035	
Secretary		
•		
Address:		
NOTE:	If necessary, you may attach an addendum to the application listing additional officers a	and/or directors.
12		
are true a	Signature of Director or Officer server director signing this document (and who is listed in number 11 above) affirms that that he or she is aware that false information submitted in a document to the Department of the Departmen	the facts stated herein nent of State constitutes
13. <u>Jame</u>	es D. Fay, Vice President and CFO	
	(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 "VIEW, 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 FIRST DAY OF JUNE, A.D. 2017.

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

4330889 8300 SR# 20174517765

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

Authentication: 202636193

Date: 06-01-17