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Special Instructions to	Filing Officer:				





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09/18/17--01002--010 **70.00

2017 OCT 10 FH 3: 24

OCT 1 1 2017 J. HARRIS

COVER LETTER

TO:	Registration Section Division of Corporations				
23.8.1.85.3	PlanGrid, Inc.				
SUBJ	JECT:Nam	e of corporation		nust include suffix	·
15 6					
Dear S	Sir or Madam:				
"Certi	nclosed "Application by Foreign of ficate of Existence," or "Certificate referenced foreign corporation to	ate of Good Sta	andin	g" and check are sub	ct Business in Florida," omitted to register the
Please	return all correspondence conce	rning this matt	er to	the following:	
Accou		C		J	
		Name o	f Pers		
PlanG	rid, Inc.				
		Firm/Co	mpan	ıv	
21113	Mission St. Suite 400		•	•	
		Add	ress		
San Fr	rancisco, CA 94110				
		City/State	and 2	 Zip code	
revenu	e@plangrid.com	•		•	
	E-mail addre	ess: (to be used	l for f	uture annual report i	notification)
For fu	rther information concerning this	matter, please	call:		
Accounting		800	,	646-0796	
	Name of Person	at (Area Co	de	Daytime Telep	hone Number
	STREET/COURIER ADDRE	iss:		MAILING A	DDRFSS:
	Registration Section			Registration S	ection
	Division of Corporations Clifton Building			Division of Co P.O. Box 6321	
	2661 Executive Center Circle			Tallahassee, F	
	Tallahassee, FL 32301			Turin de Sect 1	5 54517
Enclos	sed is a check for the following ar	nount:			
= \$70	0.00 Filing Fee	ing Fee & e of Status		78.75 Filing Fee & ertified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 19, 2017

ACCOUNTING 2111 MISSION ST SUITE 400 SAN FRANCISCO, CA 94110

SUBJECT: PLANGRID, INC. Ref. Number: W17000074947

We have received your document for PLANGRID, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

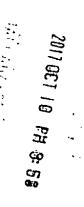
Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$800.00.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 517A00019039



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.

	orporation; must include "INCORPORATED." orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"			
(If name unavailade) Delaware		dopted for the purpose of transacting b 45-4074136	usiness in Florida)		
(State or countries) 2/19/2011	y under the law of which it is incorporated)	rporated) (FEI number, if applicable) N/A			
(Date of incorporation) (Date of duration, if other than perpetual) 10/26/2015					
	•	al office address)			
· · · ·	(Current mailin	g address, if different)			
Name and <u>stree</u> Name: ice Address:	vcorp Services, LLC 5011 South State Road 7, Suite 106		2017 OCT 10		
	Davie	, Florida			
Registered ag	(City) ent's acceptance:	(Zip code)	္ <u>မ</u> <u>န</u>		

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.

(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. Names and business addresses of officers and/or directors: A. DIRECTORS Please refer to attached addendum for list of directors Chairman: _ Address: Vice Chairman: _____ Address: _ Director: ___ Address: **B. OFFICERS** Tracy Young President: 2111 Mission St. Suite 400, San Francisco, CA 94110 N/A Vice President: Address: ____ Michael Galvin Secretary: 2111 Mission St. Suite 400, San Francisco, CA 94110 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.

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

13. Michael Galvin, Chief Financial Officer

PlanGrid Inc. Board of Directors as of July 31, 2017

Address:

2111 Mission St., Suite 400 San Francisco, CA 94110

Tracy Young

Ralph Gootee

George Hu

Douglas Leone

Benjamin Boyer

Carol Bartz

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Page 1

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "PLANGRID, 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 TWELFTH DAY OF JULY, A.D. 2017.

5082904 8300 SR# 20175003295

Authentication: 202865261

Date: 07-12-17