3/8/2018

Division of Corporations

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FOREIGN PROFIT/NONPROF TO CORPORATION Siemens Mobility, fnc.

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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		
Delaware	y under the law of which it is incorporated)	30-1018552	nlicable)
(State or country 11/29/2017			
	of incorporation) 5.	(Date of duration, if other	than perpetual)
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration)	ty)
98 Seventh Ave	nuc, 1 th Floor, New York, NY 10018	502, 1 to determine parter,	
	(Princip	oul office a (ress)	
	in South Teelin, NT 08830	•••	# No.
70 Wood Aveni	3C 30001, 12cm, 147 00050		7,5.17
70 Wood Avenu		ng address, if different)	
	(Current mailin		W HAR
	(Current mailing)		BIG HAR -8
	(Current mailin		Till Co.
Name and <u>stree</u> Name:	(Current mailing)		HAR -8 AN 9
Name and stree	(Current mailing) of address of Florida registered agent: (P.C. C.T. Corporation System) 1200 South Pine Island Road	O. Box NOT acceptable)	Till Co.
Name and stree	(Current mailing) of address of Florida registered agent: (P.C. C.T. Corporation System) 1200 South Pine Island Road	O. Box NOT acceptable)	A
Name and street Name: ice Address:	(Current mailing) at address of Florida registered agent: (P.C. C.T. Corporation System) 1200 South Pine Island Road Plantation (City)	O. Box NOT acceptable) , Florida 33324 (Zip code)	AM St. 36
Name and stree Name: ice Address: Registered ag- ving been name	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System) 1200 South Pine Island Road Plantation (City) ent's acceptance: and as registered agent and to accept serve application. Thereby accept the appoint.	O. Box NOT acceptable) , Florida 33324, Florida (Zip code) pice of process for the above state ment as registered agent and agr	ed corporation at the prove to act in this capaci
Name and street Name: ice Address: Registered againg been naming the street in this there avree to contact the street of the str	(Current mailing and to accept serve application, I hereby accept the appoint apply with the provisions of all statutes.)	O. Box NOT acceptable) , Florida 33324 (Zip code) ice of process for the above state ment as registered agent and agreelative to the proper and comple	ed corporation at the page to act in this capacite parformance of my
Name and street Name: The Address: Registered agoing been naming at this ther agree to to	(Current mailing the address of Florida registered agent: (P.C. C.T. Corporation System) 1200 South Pine Island Road Plantation (City) ent's acceptance: and as registered agent and to accept serve application. Thereby accept the appoint.	O. Box NOT acceptable) , Florida 33324 (Zip code) pice of process for the above state ment as registered agent and agriculative to the proper and completely position as registered agen	ed corporation at the page to act in this capacite parformance of my
Name: fice Address: Registered agosing been namesignated in this	(Current mailing and address of Florida registered agent: (P.C. C.T. Corporation System) 1200 South Pine Island Road Plantation (City) ent's acceptance: (City) ent's acc	O. Box NOT acceptable) , Florida 33324 (Zip code) pice of process for the above state ment as registered agent and agriculative to the proper and completely position as registered agen	ed corporation at the page to act in this capacite parformance of my

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: SEE ATTACHED A. DIRECTORS Chairman: people style style Vice Chairman: ___ Address: _____ Director: __ Address: ____ Director: Address: _______ B. OFFICERS President: ___ Address: Vice President: Address: Secretary: __ Treasurer: _ 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.

13. Marsha Smith, CFO

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

Officers/Directors of Siemens Mobility, Inc.

Marc Buncher, CEO and Director 498 Seventh Avenue, 11th Floor New York, NY 10018

Marsha Smith, CFO and Director 498 Seventh Avenue, 11th Floor New York, NY 10018

Shawn Friedman, General Counsel and Secretary 498 Seventh Avenue, 11th Floor New York, NY 10018

Lonnie J. Ellis, Assistant Secretary 170 Wood Avenue South Iselin, NJ 08830





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

DELAWARE, DO HEREBY CERTIFY "SIEMENS MOBILITY, 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 MARCH, A.D. 2018.

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

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

6637711 8300

SR# 20181634776

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

Juffrey Mr. Bullace, Secretary of State

Authentication: 202239704

Date: 03-01-18