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COVER LETTER

TO:	Registration Section Division of Corpora							
		METRIC, INC.						
SUB J	JECT:					<u>. </u>		_
		Name of	corporation	n - mu	st include suffix			
Dear S	Sir or Madam:							
"Certi	nclosed "Application I ficate of Existence," c referenced foreign co	or "Certificate o	f Good Sta	nding'	and check are sub	et Business in F omitted to regist	Florida,'' er the	
	return all correspond Ciabarra	ence concernin	g this matte	r to th	e following:			
QUAN	TUM METRIC, INC.	-	Name of	Perso	n		,_ ,_	-
16055	Old Forest Point, STE 3	02	Firm/Con	npany			·	-
Monur	ment, CO 80132		Addr	ess				-
iciabar	ra@quantummetric.com		City/State a	nd Zip	o code			-
							<u> </u>	9:::
	Ë	-mail address:	(to be used	for fut	ure annual report	notification)	1	IK
For fu	rther information cond	cerning this mat	ter, please	call:			また 25% 25%	KAR 25
Jaimie Ciabarra		a	719			400		FE
	Name of Person				Daytime Telep	hone Number		1: 53
	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 32	tions ter Circle			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7		
Enclos	sed is a check for the f	ollowing amou	nt:					
3 \$70	0.00 Filing Fee	\$78.75 Filing I Certificate of			75 Filing Fee & ified Copy	S87.50 Fil Certificat Certified	e of Status	&

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.

QUANTUM METRIC, INC.

(Enter name of co "Inc" "Co" "C	orporation; must include "INCORPORATED," "Corp," "Inc," "Co." or "Corp.")	COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate name adop	oted for the purpose of transacting busin	ness in Florida)	
DELAWARE		3359839		
(State or country 07/26/2017		(FEI number, if applicable)		
	of incorporation) 5			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in Flo	orida if prior to registration)		
16055 Old Forest				
16055 Old Forest	(SEE SECTIONS 607.1501 & 607.1502. Point, STE 302)132			
	(SEE SECTIONS 607.1501 & 607.1502. Point, STE 302)132	F.S., to determine penalty liability) ffice address)		
16055 Old Forest Monument, CO 80	(SEE SECTIONS 607.1501 & 607.1502. Point, STE 302 0132 (Principal o	F.S., to determine penalty liability) ffice address) Idress, if different)		
16055 Old Forest Monument, CO 80	(SEE SECTIONS 607.1501 & 607.1502. Point, STE 302)132 (Principal o	F.S., to determine penalty liability) ffice address) Idress, if different)	The Control of the Co	
16055 Old Forest Monument, CO 86	(SEE SECTIONS 607.1501 & 607.1502. Point, STE 302)132 (Principal o (Current mailing ad t address of Florida registered agent: (P.O. B.	F.S., to determine penalty liability) ffice address) Idress, if different)	TOTAL VENEZAL ELONION	
16055 Old Forest Monument, CO 80 Name and stree Name:	(SEE SECTIONS 607.1501 & 607.1502. Point, STE 302)132 (Principal o (Current mailing ad t address of Florida registered agent: (P.O. B. Registered Agents Inc. 7901 4th Street N, Ste 300	F.S., to determine penalty liability) ffice address) Idress, if different)	The Control of the Co	

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.

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:

10000	ld Forest Point, STE 302						
ress: Monum	nt, CO 80132					_	
-	aimie Ciabarra		 .				
Chairman: _							
ress:		.,					
Monume 	nt, CO 80132			·	_		
ctor:							
ress:		<u>-</u> _					
ctor:						_	
OFFICERS				· · · ·			
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	ld Forest Point, STE 302					THE STATE OF THE S	0.0
	ent, CO 80132		_				Carrie -
	imie Ciabarra					PH	11
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ΓE: If neces	sary, you may attach an adde	endum to the app	lication listing :	idditional office	ers and/or dire	ctors.	
	Jainer S	K Ciaharra	e				
	S	ignature of Direct	tor or Officer	·			
officer or du	ector signing this document ne or she is aware that false	(and who is lister	d in number 11	above) affirms nent to the Den	that the facts s artment of Sta	stated he	rein imase

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

Doc ID: d52b9550d5e49b7a41fa810599d3269d70c59713





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

DELAWARE, DO HEREBY CERTIFY "QUANTUM METRIC, 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 MARCH, A.D. 2019.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "QUANTUM METRIC, INC." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF JULY, A.D. 2017.

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

6492906 8300 SR# 20191734217

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

Authentication: 202424843

Date: 03-12-19