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(Requestor's Name)						
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PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificate	s of Status				
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COVER LETTER

то:	Registration Section Division of Corpo					
	Relativity Sp					
SUBJ	IECT:				<u> </u>	
		Name of	corporation	- must inc	clude suffix	
Dear S	Sir or Madam:					
"Certi	nclosed "Application ficate of Existence," referenced foreign c	or "Certificate o	of Good Star	iding" and	check are su	act Business in Florida," bmitted to register the
Please Roxan	return all correspon ne Fung	dence concerning	g this matter	r to the fol	lowing:	
Relativ	vity Space, Inc.		Name of	Person		
8701 A	viation Blvd		Firm/Com	pany		
Los Ar	ngeles, CA, 90301		Addre	ess		
finance	e@relativityspace.com	(City/State a	nd Zip cod	c	
		E-mail address: (to be used f	or future a	nnual report	notification)
For fur	ther information con	cerning this mat	ter, please c	all:		
Roxanne Fung		650	862-194	862-1945		
Name of Person		at	Arca Code	-) : D	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				F E F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	ed is a check for the .00 Filing Fee	following amour \$78.75 Filing F Certificate of S	ee & 🗖	\$78.75 Fi	ling Fee & 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. Relativity Space, Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 47-5539518 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (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) 8701 Aviation Blvd, Inglewood, CA 90301 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Lorenzo Locante Name: Launch Complex 16, ICBM Road, Facility # 13112, Cape Canaveral Air Force Station Office Address: Cape Canaveral 32920 (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. (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 SEE BELOW FOR OFFICERS - SECTION B. Chairman: Vice Chairman: Address: Director: _ Address: **B. OFFICERS** Timothy Ellis, CEO/Cofounder President: 8701 Aviation Blvd, Inglewood, CA, 90301 Address: Jordan Noone, CTO/Cofounder Vice President: 8701 Aviation Blvd, Inglewood, CA, 90301 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.

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

Timothy Ellis, ČEO/Cofounder

13. _



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

DELAWARE, DO HEREBY CERTIFY "RELATIVITY SPACE, 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 FIFTH DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RELATIVITY SPACE, INC." WAS INCORPORATED ON THE TWENTY-SIXTH DAY OF OCTOBER, A.D. 2015.

The state of the s

Authentication: 202588899

Date: 04-05-19