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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1303. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Johcase, Inc. L.

(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc." "Co," or "Corp.")

| Defaware | 3. | 47-2656845 | | |
|------------------------------------|---|---|--------------------------|-------|
| (State or country under the law of | f which it is incorporated) | (FEI nur | mber, if applicable) | |
| 12/31/2014 | 5. | | TAC | 2 |
| (Date of incorporation | 1 | (Date of duratio | on, if other than perpet | (EII) |
| N/A | | | | |
| (L) (SEE S | ate first transacted business in ECTIONS 607,1501 & 607,15 | n Florida, if prior to registi 502, F.S., to determine per | ration) SH | 121 |
| 201 Broadway, Floor 7, Cambrid | | | | |
| | (Princip | bal office address) | | . C |
| | | | | 5 |
| | (Current mailir | ng address, if different) | | |

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

| Name: | C T Corporation System | |
|-----------------|-----------------------------|---------------|
| Office Address: | 1200 South Pine Island Road | |
| | Plantation | Florida 33324 |
| | (Cuy) | (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.

| | | C T Corporation System | |
|-----|----------|--------------------------------|--|
| By: | Cxg-Hil- | Olga Hinkel, VP | |
| | | (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.

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11. Names and business addresses of officers and/or directors:

A. DIRECTORS

| Director: | David Blandin 🗸 | |
|----------------------|---|------------|
| Address | c/o Jobcase, Inc., 201 Broadway, Floor 7, Cambridge, MA 02139 | |
| | Frederick Goff 🗸 | |
| Address | c/o Jobcase, Inc., 201 Broadway, Floor 7, Cambridge, MA 02139 | |
| Director: | Mark Hastings 🗸 | |
| Address: | c/o Jobcase, Inc., 201 Broadway, Floor 7, Cambridge, MA 02139 | 7ALL 12019 |
| Director: | Mark Casady 🗸 | |
| Address: | c/o Jobcase, Inc., 201 Broadway, Floor 7, Cambridge, MA 02139 | SSR 2 |
| Director: | Indupiakas Keri 🖌 | |
| Address [*] | c/o Johcase, Inc., 201 Broadway, Floor 7, Cambridge, MA 02139 | ۲E NTE |
| | | |

B. OFFICERS

| President: | Frederick Goff 🗸 |
|--------------------------|--|
| | e/o Jobease, Inc., 201 Broadway, Floor 7, Cambridge, MA 02130 |
| | |
| Vice Presi | ident |
| Address | |
| | |
| Secretary Address: | Ashley Wall |
| | c/o Jobcase, Inc., 201 Broadway, Floor 7, Cambridge, MA 02139 |
| | |
| | |
| | If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| 12. | |
| are true a a third do | Signature of Director or Officer seer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes egree felony as provided for in s.817.155. F.S. |

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

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "JOBCASE, 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 TWENTIETH DAY OF JUNE, A.D. 2019.

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

> FILED 2019 JUN 21 PM 4:47 SECRETARY OF STATE TALLAHASSEE, FLORIDA



3812428 8300

SR# 20195565756 You may verify this certificate online at corp.delaware gov/authver.shtml

Authentication: 203067749 Date: 06-20-19