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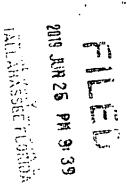
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WA!T	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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BRUCE

COVER LETTER

TO:	Registration Section Division of Corpora							
	Snapwiz Inc							
SUBJ	ECT:		<u> </u>					_
		Name o	of corporation	- must include suffix				
Dear S	ir or Madam:							
"Certi		or "Certificate	of Good Stan	Authorization to Trans ding" and check are su ss in Florida.				
Please Leslie	return all correspond Tyler	lence concerni	ng this matter	to the following:				
			Name of I	Person				_
Snapw	riz Inc							
			Firm/Com	pany				_
39300	Civic Center Drive st	e 310		•				
			Addre				~==	_
Fremont, CA 94538					2019 .			
			City/State at	nd Zip code		<u> </u>	<u> </u>	
Leslie.	Tyler@snapwiz.com					(SS)	25	}
		E-mail address:	(to be used t	or future annual report	notification)	111 .	3	- [
For fu	rther information con	cerning this m	atter, please c	all:		Lekio	وي دي	C
Leslie Tyler		415	689-9560		1.4	_		
	Name of Person		at (Area Code	Daytime Tele	phone Number	r		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
Enclos	ed is a check for the	following amo	unt:					
1 \$70	0.00 Filing Fee 🗖	\$78.75 Filing Certificate o		\$78.75 Filing Fee & Certified Copy	S87.50 Certific Certific	cate of	Statu	s &

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.

Snapwiz Inc			
(Enter name of c	orporation; must include "INCORPORATED," " orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,	
	able in Florida, enter alternate corporate name ado		business in Florida)
California		7-3644378	
	y under the law of which it is incorporated)	(FEI number, if appl	licable)
	5.		
(Date of incorporation) 5. (Date of duration, if other than perpetual) September 30, 2016		nan perpetual)	
•			
620 East Unive	(SEE SECTIONS 607.1501 & 607.1502 rsity Avenue, Gainesville, FL 32601	office address)	,
			F. 28
	(Current mailing a	iddress, if different)	
. Name and street	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	₩ 2
Name:	Sean Kendall	_	- T
Office Address:	233 Gettysburg Lane	_	26 PH 9:39
	Daytona Beach	— 32119 , Florida	`. · · · · · · · · · · · · · · · · · · ·
	(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.

Sew Khalill
(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 Chairman: ______ Vice Chairman: _____ Ori Sasson Director: 11 E Surno, Orinda, CA 94563 Address: B. OFFICERS Madhu Narasa President: 344 Adelaide Hills Court San Ramon, CA 94582 Address: _____ Satish Kumar Vice President: **(4)** 4536 Novato Street Union City, CA 94581 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. MADHU NARASA

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

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

SNAPWIZ INC.

FILE NUMBER: C3320641 FORMATION DATE: 09/15/2010

TYPE: DOMESTIC CORPORATION

JURISDICTION: CALIFORNIA

STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 04, 2019.

ALEX PADILLA Secretary of State