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TALLAHASSEE, FLORIDA

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION
PROVENANCE TECHNOLOGIES, INC.**

Certificate of Status	0
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Page Count	05
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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.

1. Provenance Technologies, Inc.
(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)
2. Delaware 3. 83-2370480
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/19/2018 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. Upon Qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 235 Pine Street 22nd Floor, San Francisco, CA 94104
(Principal office address)
- same
(Current mailing 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
(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.

C T Corporation System.

By: Alfred Younan **Assistant Secretary**
(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 ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

TELEPHONE
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TALLAHASSEE, FLORIDA

B. OFFICERS SEE ATTACHMENT

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: Ira Lam

Address: 235 Pine Street 22nd Floor, San Francisco, CA 94104

Treasurer: Bela Pandya

Address: 235 Pine Street 22nd Floor, San Francisco, CA 94104

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

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. Scott Butler, Chief Executive Officer & Chief Compliance Officer

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

**Attachment to Florida
Officers & Directors**

- 1 Full Name: Scott Butler ✓
Officer/Director: Officer
Officer's Title: CEO
Director's Title:
Business Address: 235 Pine Street 22nd Floor
City: San Francisco
State: CA
ZIP Code: 94104
- 2 Full Name: Ira Lam ✓
Officer/Director: Officer, Director
Officer's Title: Secretary
Director's Title: Director
Business Address: 235 Pine Street 22nd Floor
City: San Francisco
State: CA
ZIP Code: 94104
- 3 Full Name: Bela Pandya ✓
Officer/Director: Officer, Director
Officer's Title: Treasurer
Director's Title: Director
Business Address: 235 Pine Street 22nd Floor
City: San Francisco
State: CA
ZIP Code: 94104
- 4 Full Name: John Becca ✓
Officer/Director: Director
Officer's Title:
Director's Title: Director
Business Address: 235 Pine Street 22nd Floor
City: San Francisco
State: CA
ZIP Code: 94104

TALLAHASSEE, FLORIDA
2019 AUG 16 PM 4:37

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROVENANCE TECHNOLOGIES, 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 AUGUST, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2019 AUG 16 PM 4:37
TALLAHASSEE, FLORIDA



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

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