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Division of Corporations Fax Number : (850)617-6383 From: Account Name : CAPITOL SERVICES, INC. Account Number : 120160000017 Phone : (855)498-5500 Fax Number : (800)432-3622 Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address: FOREIGN PROFIT/NONPROFIT CORPORATION HIGHSPOT, INC. Certificate of Status 0					
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· C	COVER LETTER					
TO: Registration Section Division of Corporations						
SUBJECT: Highspot						
Name of	corporation - must	nclude suffix				
Dear Sir or Madam:						
The enclosed "Application by Foreign Cor" "Certificate of Existence," or "Certificate of above referenced foreign corporation to tra Please return all correspondence concerning	of Good Standing" at ensact business in Flo	nd check are submi orida.	Business in Florida," itted to register the			
f	9	.				
	Name of Person					
	Firm/Company					
	A 13					
	Address					
	City/State and Zip	ode				
MATT.BOISEN@	HIGHSPOT.COM	Λ				
E-mail address:	(to be used for futur	e annual report no	tification)			
For further information concerning this ma	atter, please call:					
Name of Person	at ()	Dartime Telepho	ne Number			
Name of Person	Area Code	Daymne Telepho	one runner			
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is a check for the following amo Please make check payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of	PARTMENT OF ST 3 Fee & \$ \$78.7	ATE 5 Filing Fee & fied 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.

f name unavailab	le in Florida, enter alternat	te corporate name	adopted for the purpose of transacti	ng business in Florida)
Delaware	under the law of which it i	3.	(FEI number, if a	
(State or country				
3/19/2012	<u> </u>	5.	(Date of duration, if other	
(Date o	of incorporation)		(Date of duration, if other	than perpetual)
 -	(Date first tra	nsacted business i 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liab	lity)
2211 Elliott	Avenue, Ste. 400	Seattle, WA	98121-3625	
		(Principal off	ice <u>street</u> address)	282
		(Current maili	ng address, if different)	25 76
Name and street			O. Box NOT acceptable)	
Name:	Capitol Corporate	e Services, In	<u>C</u>	
ffice Address:	515 E. Park Aver	nue, 2nd Floo	<u>r</u>	्राष्ट्रीय करेंद्र स्ट्राइट
	Tallahassee		Florida 32301	្តំ
	(City	y)	, Florida <u>32301</u> (Zip code)	
aving been names esignated in this arther agree to co	nt's acceptance: ed as registered agent an application, I hereby ac amply with the provision	nd to accept serv cept the appoint is of all statutes igations of my p	vice of process for the above statement as registered agent and ag relative to the proper and comp osition as registered agent.	ree to act in this Eupa lete performance of m
	him.		Kim Tadlock, Asst. Sec. on of Capitol Corporate Servic	

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS					
□ Chairman	Name: Robert Wahbe	Chairman	Name: Christopher Larson		
□Vice Chairman	Address: 2211 Elliott Avenue	□Vice Chairman	Address: 2211 Elliott Avenue		
Director	Suite 400	□Director	Suite 400		
□President	Seattle, WA 98121	□President	Seattle, WA 98121		
□ Vice President		□Vice President			
Secretary	☐ Treasurer	Secretary	☑ Treasurer		
MOther CEO	Other	⊠Other CFO	Other		
☐Chairman ☐Vice Chairman ☐Director	Name: Robert Wahbe Address: 2211 Elliott Avenue Suite 400	□ Chairman □ Vice Chairman □ Director	Name:		
☑ President	Seattle, WA 98121	President			
□Vice President		□Vice President			
☐ Secretary	☐Treasurer	□Sостечагу	☐Treasurer		
Other		☐ Other	□ Other		
□ Chairman	Name: Matthew Boisen Address: 2211 Elliott Avenue	☐ Chairman	Name:		
□Vice Chairman	Suite 400	Director			
Director	Seattle, WA 98121	_			
☐ President		☐ President			
□ Vice President		□ Vice President			
Secretary General I	☐ Treasurer	☐ Secretary ☐ Other			
ØOther General (Councel Other				
individuals may be	Use an attachment to report more than six (6). The attac e added to the index when filing your Florida Departments: /s/ Matt Boisen	thment will be image int of State Annual R	ed for reporting purposes only. Non-indexed eport form.		
12Signature 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. Matt Boisen, as General Councel					
13. (Typed or printed name and capacity of person signing application)					

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "HIGHSPOT, 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 TWENTY-SIXTH DAY OF AUGUST, A.D. 2020.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HIGHSPOT, INC."

WAS INCORPORATED ON THE NINETEENTH DAY OF MARCH, A.D. 2012.

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

5126410 8300 SR# 20206954488

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

Authentication: 203542311

Date: 08-26-20