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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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COVER LETTER

| TO: Registration Section Division of Corporations | | | |
|--|--------------------|--|---|
| SUBJECT: AERO TECHNOLOGIES, II | NC. | | |
| | of corporation | - must include suffix | |
| Dear Sir or Madam: | | | |
| The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to t | of Good Stand | ding" and check are subm | |
| Please return all correspondence concern | ing this matter | to the following: | |
| Mikael Pelet | | | |
| | Name of I | Person | |
| Aero Technologies, Inc. | | | |
| | Firm/Com | pany | |
| 660 4th St., Suite 193 | | | |
| | Addre | SS | |
| San Francisco, CA 94107 | | | |
| | City/State ar | nd Zip code | |
| mikacl@aero.com | | | |
| E-mail address | s: (to be used for | or future annual report no | tification) |
| For further information concerning this n | natter, please ca | all: | |
| Melanie Yuvienco | 650 at (| 843-5955 | |
| Name of Person | Area Code | Daytime Telepho | one Number |
| 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 ame Please make check payable to: FLORIDA D \$70.00 Filing Fee \$78.75 Filin Certificate o | EPARTMENT g Fee & | OF STATE \$78.75 Filing Fee & Certified Copy | S87.50 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.

| 1. AERO TECHN | OLOGIES, INC. | | | |
|---------------------------------------|---|--------------------------------------|---|--|
| (Enter name of c "Inc.," "Co.," "C | orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.") | "COMPANY," "CORPORATION | , | |
| (If name unavails | able in Florida, enter alternate corporate name ad | opted for the purpose of transacting | business in Florida) | |
| Delaware 2. | 3. | | | |
| (State or countr | y under the law of which it is incorporated) | (FEI number, if applicable) | | |
| 4 12/19/2013 | 5 | | | |
| (Date | of incorporation) | (Date of duration, if other th | (Date of duration, if other than perpetual) | |
| 6 | | | | |
| | (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502) | | y) | |
| 7 660 4th St., Suite | 193, San Francisco, CA 94107 | | | |
| /· <u></u> | (Principal office | street address) | | |
| | (Current mailing | address, if different) | | |
| 8. Name and <u>stree</u> Name: | et address of Fłorida registered agent: (P.O. l Incorporating Services, Ltd. | Box <u>NOT</u> acceptable) | 2020 DEC 21 SECAS DATA ALLAHASS | |
| Office Address: | 1540 Glenway Drive | <u> </u> | | |
| | Tallahassee | , Florida 32301 | | |
| | (City) | (Zip code) | 5 5 | |

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 dutie and I am familiar with and accept the obligations of my position as registered agent.

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

| | Name: | ■Chairman | Name: |
|----------------------|--|-----------------------------|----------------------------------|
| | | | 660 Ath St. Suite 103 |
| C C | Address:San Francisco, CA 94107 | □Vice Chairman | Address: San Francisco, CA 94107 |
| ■ Director | Sai Francisco, CA 94107 | Director | Sali Francisco, CA 94107 |
| □President _ | <u> </u> | □President | |
| □Vice President _ | | □Vice President | |
| ☐ Secretary | □Treasurer | □ Secretary | □Treasurer |
| Other | Other | □Other | □ Other |
| □Chairman ! | Uma Subramanian Name: | □Chairman | Mikael Pelet Name: |
| | Address: 660 4th St., Suite 193 | □Vice Chairman | 660 4th St., Suite 193 |
| | San Francisco, CA 94107 | □Director | San Francisco, CA 94107 |
| ■President _ | | □President | |
| □Vice President _ | | □Vice President | |
| □Secretary | □Treasurer | □ Secretary | Treasurer |
| □Other | Other | ■Other | Other |
| □Chairman 1 | Jon Gordon | □Chairman | Name: |
| D Vice Chairman | Address: 660 4th St., Suite 193 | | Address: |
| | San Francisco, CA 94107 | Director | 7144.1633. |
| □President _ | | □President | |
| □Vice President _ | | □Vice President | |
| ■ Secretary | □Treasurer | ☐ Secretary | □Treasurer |
| General Co | ounsel Other | □Other | |
| individuals may be a | se an attachment to report more than six (6). The added to the index when filing your Florida Dep Mikael | partment of State Annual Re | |
| 12 | Signature of Dire | • | |

s.817.155, F.S.

13. Mikael Pelet, CFO



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

DELAWARE, DO HEREBY CERTIFY "AERO 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 SEVENTEENTH DAY OF DECEMBER, 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 "AERO TECHNOLOGIES, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2013.

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

Authentication: 204355065

Date: 12-17-20