# F22000005421

(Requestor's Name)						
(Address)						
(112.22)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
(2223						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special histactions to Filling Officer.						

Office Use Only



200392830882

08/25/22--01001--018 \*\*70.00

2022 AUG 25 AM H : 54 2022 AUG 25 AM 10: 40

S. ROBERTS AUG 2 5 2022

### ACCESS, \_\_\_\_

CORPORATE When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### **WALK IN**

	CERTIFIED COP	Υ		
	РНОТОСОРУ			
	CUS			
	FILING	FOREIGN INC		
P	OSTHOG INC.			
(C	ORPORATE NAME AND I	OOCUMENT #)		
(C	ORPORATE NAME AND I	DOCUMENT #)		
(C	ORPORATE NAME AND I	DOCUMENT #)		
(C	ORPORATE NAME AND I	DOCUMENT #)		
(C	ORPORATE NAME AND I	DOCUMENT #)		
(C	ORPORATE NAME AND I	DOCUMENT #)		

### 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.

PostHog Inc.				
	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"		_
(If name unavaila	ble in Florida, enter alternate corporate name ad	lopted for the purpose of transacting b	usiness in Florida	1)
Delaware	3 3	52678319		
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)		_
12/03/2019	5			
(Date	of incorporation)	(Date of duration, if other than	n perpetual)	
5. <u>02/17/2022</u>				
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150)			
7. 2261 Market St. #-	4008, San Francisco, CA 94114-1612		7.8	
	(Principal office	street address)	72	_
9450 SW Gemini	Dr, PMB 73938, Beaverton, OR 97008-7105		322 AUG	٠.
	(Current mailing	address, if different)	25	_
	t address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	WH 10: 40	
Name:	Telos Legal Corp.	<del></del>	r O	I
Office Address:	155 Office Plaza Drive			
	Tallahassee	Florida 32301		
	(City)	, Florida(Zip code)		
lesignated in this ( further agree to co	ed as registered agent and to accept service application, I hereby accept the appointme apply with the provisions of all statutes relewith and accept the obligations of my positions of my positions of my positions and accept the obligations of my positions.	nt as registered agent and agree t ative to the proper and complete p tion as registered agent.	o act in this cap performance of r	acity. I
	(Registered agent's sign	sature)		

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.

#### A. DIRECTORS James Hawkins □ Chairman Name: Chairman Name: 2261 Market St, #4008 ☐ Vice Chairman Address: ☐ Vice Chairman Address: San Francisco, CA 94114-1612 ☐ Director Director □ President □ President □Vice President ☐ Vice President ☐ Secretary □Treasurer □ Secretary □Treasurer ■Other CEO □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ Name: \_\_\_\_\_ Name: □Chairman □ Chairman □Vice Chairman Address: \_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_ □ Director □ Director ☐ President □ President □Vice President \_\_\_ ☐ Vice President □Secretary ☐ Treasurer □ Secretary Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ □ Chairman Name: □ Chairman Name: □Vice Chairman Address: \_\_\_\_\_ ☐Vice Chairman Address: \_\_\_\_\_ □ Director Director □President □President □Vice President □Vice President □ Secretary ☐Treasurer □ Secretary Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ ☐Other \_\_\_\_\_ □Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. /s/ James Hawkins 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.

James Hawkins, CEO

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "POSTHOG 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 JULY, A.D. 2022.

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

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

WAS INCORPORATED ON THE THIRD DAY OF DECEMBER, A.D. 2019.

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

Authentication: 204007397

Date: 07-26-22