

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

Office Use Only

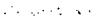


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RECEIVED 2022 SEP 23 AM 10: 03

S. FRANKLIN





FLORIDA DEPARTMENT OF STATE Division of Corporations

September 26, 2022

CT CORP

SUBJECT: BUSBOT INCORPORATED

Ref. Number: W22000121893

CORRECTED
Please Allow For Pile Date
Same File Date

We have received your document for BUSBOT INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

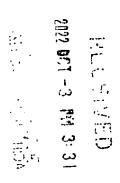
According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$300.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 122A00021354



## **CT CORP**

### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date:		09/23/2022	a: DW
	<del></del>	Acc#I20160000072	4: ( ) = V
Name:	Busbot In	corporated	
Document #:			
Order #:	14547122	2	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination:  Number of Certs:	20.2
Filing: ✓	Certific Plain: COGS:		30 P. 1:17
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amou	nt:\$ <b>3</b> 78.75	

Thank you!

### **COVER LETTER**

TO: Registration Section Division of Corporation	ons		
SUBJECT: Busbot Incorpora			
SUBJECT:	Name of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by "Certificate of Existence," or above referenced foreign corp	'Certificate of Good Stand	ing" and check are submitte	
Please return all corresponden	ce concerning this matter t	o the following:	
David Lopes			
	Name of P	erson	
Goodwin Procter LLP			
	Firm/Comp	pany	
100 Northern Avenue			
	Addres	SS .	
Boston, Massachusetts 02210			262
	City/State an	d Zip code	cation)
dlopes@goodwinlaw.com			
E-r	nail address: (to be used fo	r future annual report notifi	cation) O
For further information conce	rning this matter, please ca	ill:	
David Lopes at (617 ) 570-1059  Name of Person Area Code Daytime Telephone Number			
Name of Person	Area Code	Daytime Telephone	Number
STREET/COURIEF Registration Section Division of Corporati- The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	ons ssec n. Suite 810	MAILING ADDI Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on rations
_	LORIDA DEPARTMENT		\$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.

	ible in Florida, enter alternate corporate name ad	opted for th	he purpose of transacting b	usiness in Florida)
Delaware	3			
(State or countr	y under the law of which it is incorporated)		(FEI number, if applic	cable)
1/3/2017	5		ate of duration, if other than	
(Date	of incorporation) 5	(Da	ate of duration, if other than	n perpetual)
April 2, 2020				
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150)			
205 Hudson Stree	et, 7th Floor, New York, NY 10013			
	(Principal office	street add	ress)	
	(Current mailing	address, if	different)	
Name and stree	t address of Florida registered agent: (P.O.	Box <u>NOT</u>	<u> [acceptable]</u>	20
Name:	C T Corporation System			2912 5
ffice Address:	1200 South Pine Island Road			٠,
mee Address.	Plantation	<del></del> FL	33324	30
	(City)	<del></del> '	(Zip code)	マニ
			·	:
	ent's acceptance:			••

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.

Olga Hinkel, Vice President

(Registered agent's signature)

### DocuSign Envelope 4D: 3F30D925-6CB7-4B93-9E09-C88B0A4DC273

#### A. DIRECTORS

⊟Chairman	Name:	□Chairman	Name: Shawn	Vo	
	Address: 205 Hudson Street, 7th Floor	□Vice Chairman	205 Hudson Street, 7th Floor		
Director	New York, NY 10013	Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	Treasurer	□Secretary		<b>™</b> Treasurer	
■Other	□Other	□Other		□Other	
□ Chairman	Name: Jon Stein 205 Hudson Street, 7th Floor	□Chairman	Name:	Silverman Hudson Street, 7th Floor	
□ Vice Chairman	Address: New York, NY 10013	□Vice Chairman		Y 10013	
Director		⊡Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□ Secretary		□Treasurer	
□Other	Other	□Other		□Other	
□Chairman	Blake Modersitzki	□ Chairman	Name:	2022 5   7	
□Vice Chairman	Address: 205 Hudson Street, 7th Floor	□Vice Chairman	Address:	<u> </u>	
■Director	New York, NY 10013	□Director		70	
□President		□President			
□Vice President		□ Vice President			
□Secretary	□Treasurer	☐ Secretary		□Treasurer	
□Other	□()ther	□Other		□Other	
individuals may be	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Departme	nt of State Annual Re		urposes only. Non-indexed	
12. Elearatic kri	Signature of Director o	r Officer			
she is aware that fi s.817.155, F.S.	ctor signing this document (and who is listed in number alse information submitted in a document to the Departi	r 11 above) affirms th	nat the facts state ates a third degre	d herein are true and that he or e felony as provided for in	
13. Bharath Kris	hnamoorthy, Chief Executive Officer (Typed or printed name and capacity of personnel)	a shallow and the st			
	(Typed or printed name and capacity of perso	on signing application	11		



Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "BUSBOT INCORPORATED" 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-SECOND DAY OF SEPTEMBER, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2022 - 20 Pit I: 11



Authentication: 204458362

Date: 09-22-22

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SR# 20223595043