

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230001718853)))



H230001718853ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name	:	C T CORPORATION	SYSTEM
Account Number	:	FCA00000023	
Phone	:	(954)208-0845	
Fax Number	:	(614)573-3996	

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

Email Address: DEBORA.PYLE@SIEMENS.COM



To:

## 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.

BUILDING ROBOTICS, INC. 1. (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) 3. 26-4401097 Delaware 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) 07/27/2012 Perpetual 4 (Date of duration, if other than perpetual) (Date of incorporation) upon qualification 6. (Date first transacted business in Florida, if-prior to registration) (SEE SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability)

\_ 1504 Franklin Street, Suite 200, Oakland, CA 94612

· · · · · · · · · · · · · · · · · · ·	(Principal o	ffice <u>street</u> address)	20231
<u>, ,</u>	(Current m <del>a</del> i	ing address, if different)	HY -
	et address of Florida registered agent: (F C T Corporation System	.O. Box <u>NOT acceptable</u> )	
Name: Office Address:	1200 South Pine Island Road		
Office Audress.	Plantation	FI. 33324	
	(City)	(Zip code)	

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.

Devi	C T Corporation System	Alago			
DY:	(Registered agent's signature	Judith B. Argao, Asst. Secy:			

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):

<sup>9.</sup> Registered agent's acceptance:

Page: 5 of 6

2023-05-08 15:07:02 CST

A. DIRECTORS			
Chairman	Stefam Schwab Name:	Chairman	Noe Bermudez
□Vice Chairman	3979 Freedom Circle	⊡Vice Chairman	950 Deerfield Parkway Address:
Director	Santa Clara, CA 95054	Director	Buffalo Grove. IL 68089
DPresident		DPresident	
DVice President	, 	⊡Vice President	
Secretary	Treasurer	Secretary	
ElOther	Other	E)Other	
⊡Chairman	Peter Kamps- Name:	DChairman	Name:
⊡Vice Chairman	950 Deerfield Parkway		Address:
Director	Buffalo Grove, IL 60089		
President		President	*****
☐Vice President		□Vice President	
Scentary	Treasurer	Secretary	Treasurer
00ther	L'IOther	Other	Odter
🛛 Chairman	Name:	□Chainnan	Name:
□Vice Chairman	Address:	☐Vice Chairman	Address:
Director		Director	a, a,
President .		President	
	<u></u>	El Vice President	
Secretary	Treasurer	Secretary	Treasurer
00ther	Other	□0ther	

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. 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 of she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$817,155, F.S.

Noe Bernudez, Secretary 13.

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



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BUILDING ROBOTICS, 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 EIGHTH DAY OF MAY, A.D. 2023.

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.





Authentication: 203297336

5190844 8300