F23000005757

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| | | | | |
| (Address) | | | | |
| (waters) | | | | |
| | | | | |
| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
| | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Duniage Estivable co.) | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| | | | | |
| Certified Copies Certificates of Status | | | | |
| Sertinodico di Statos | | | | |
| | | | | |
| Special Instructions to Filing Officer | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| W23-134078 | | | | |
| | | | | |

Office Use Only



200416680602

10/05/23-+01002--002 **70.00

10/10/29--01001--607 **450.06

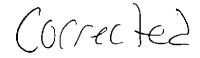
2023 OCT -9 AM IO: 18

APROVED

語を開すー100回 BBVISIOSM

OCT 10 2023 K. Brumbley





FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2023

CORP ACCESS

SUBJECT: GLOBALITY, INC. Ref. Number: W23000136078

We have received your document for GLOBALITY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$450.00.

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.

Letter Number: 323A00022957

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

2023 OCT -9 AH 10: 51

CORPORATE ACCESS, _____

When you need ACCESS to the world

INC.

SPECIAL

INSTRUCTIONS:

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

| | PIC | CK UP: | BROOK 10/4 | |
|-----|--|-----------|-------------|-------------|
| | CERTIFIED COPY | | | |
| XX | РНОТОСОРУ | | | |
| | GS | | | · |
| XX | FILING | _FOI | DREIGN INC. | |
| • | GLOBALITY, INC. (CORPORATE NAME AND DO | CUMENT #) | | |
| | | ., | | |
| - | (CORPORATE NAME AND DO | CUMENT #) | | |
| • - | (CORPORATE NAME AND DO | CUMENT #) | | |
| • - | (CORPORATE NAME AND DO | CHMENT # | | |
| | COM ONATE NAME AND DO | COMENT#) | | |
| _ | (CORPORATE NAME AND DO | CUMENT #) | | |
| - | (CORPORATE NAME AND DO | CUMENT #) | | |

| COVER LETTER | | | | | | |
|--|--|--|--|--|--|--|
| TO: Registration Section | | | | | | |
| Division of Corporations | | | | | | |
| SUBJECT: Globality, Inc. | | | | | | |
| Name of corporation - mu | ist include suffix | | | | | |
| Dear Sir or Madam: | | | | | | |
| The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida." "Certificate of Existence." or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida. | | | | | | |
| Please return all correspondence concerning this matter to the | e following: | | | | | |
| Tanya Esqueda | | | | | | |
| Name of Perso | n | | | | | |
| Globality, Inc. | | | | | | |
| Firm/Company | | | | | | |
| 395 Page Mill Rd. Ste. 150 | | | | | | |
| Address | | | | | | |
| Palo Alto, CA 94306 | | | | | | |
| City/State and Zi | p code | | | | | |
| payroll@globality.com | | | | | | |
| E-mail address: (to be used for fu | ture annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | | |
| Tanya Esqueda at (650) 3 | 52-8900 | | | | | |
| Name of Person Area Code | Daytime Telephone Number | | | | | |
| STREET/COURTER 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 amount: Please make check payable to: FLORIDA DEPARTMENT OF S \$\Boxed{\text{L}}\$ \$70.00 Filing Fee \$\Boxed{\text{L}}\$ \$78.75 Filing Fee \$\Boxed{\text{L}}\$ \$78. | TATE .75 Filing Fee & S87.50 Filing Fee. | | | | | |

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.

| | orporation: must include "INCORPORATED orp." "Inc." "Co." or "Corp.") | ," "COMPANY," "CORPORATIO | N." | |
|--|--|---|---------------------------------------|--|
| (If name unavail | able in Florida, enter alternate corporate name | adopted for the purpose of transacting | ng business in Florida) | |
| Delaware | 3. | 47-3197879 | | |
| (State or country under the law of which it is incorporated) | | (FEI number, if applicable) | | |
| 02/12/2015 | 5. | | | |
| (Date | of incorporation) | (Date of duration, if other than perpetual) | | |
| payroll 0 | 2:07/2020 | | | |
| (Principal o | (SEE SECTIONS 607.1501 & 607.1 office street address)395 Page Mill Road | | ityı | |
| | | ng address, if different) | 2023 OCT | |
| . Name and <u>stree</u> | at address of Florida registered agent: (P. | O. Box <u>NOT</u> acceptable) | 1 - | |
| Name; | Telos Legal Corp. | | 9 ! | |
| ffice Address: | 155 Office Plaza Dr. | | A . | |
| | Tallahassee | , Florída | · · · · · · · · · · · · · · · · · · · | |
| | (City) | (Zip code) | | |

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



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 | | | | | | | |
|--|---------------------------|-----------------|--------------------------|--|--|--|--|
| □Chairman | Name: Joel Hyatt | □Chairman | Name: Jared Hyatt | | | | |
| □Vice Chairman | Address: _Same.as.company | □Vice Chairman | Address: Same as company | | | | |
| □Director | | □Director | | | | | |
| □President | | □President | | | | | |
| □Vice President | | □Vice President | | | | | |
| □Secretary | ☐ Treasurer | □Secretary: | □Treasurer | | | | |
| ZOther CEO | □Other | ZOther CFO | []Other | | | | |
| | | | | | | | |
| ⊒Chairman | Name: Lior Delgo | ⊟Chairman | Name; | | | | |
| ∃Vice Chairman | Address: Same as company | □Více Chairman | Address: | | | | |
| □Director | | □Director | | | | | |
| ⊋President | | □President | | | | | |
| □Vice President | | □Vice President | | | | | |
| ZISecretary | □Treasurer | □Secretary | □Treasurer | | | | |
| □Other | Other | □Other | Other | | | | |
| | | | | | | | |
| □Chairman | Name. | □Chairman | Name: | | | | |
| TiVice Chairman | Address: | □ Vice Chairman | Address: | | | | |
| □Director | | □Director | | | | | |
| □President | | □President | | | | | |
| □Vice President | | □Vice Presidem | | | | | |
| □Secretary | Treasurer | ☐ Secretary | Treasurer | | | | |
| ⊒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. | | | | | | | |
| 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. 13 Jared Hyatt. CFO | | | | | | | |

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GLOBALITY, 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 FOURTH DAY OF OCTOBER, 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 SAID "GLOBALITY, INC."

WAS INCORPORATED ON THE TWELFTH DAY OF FEBRUARY, A.D. 2015.

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

Authentication: 204305706

Date: 10-04-23