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(R	equestor's Name)	
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(C	ity/State/Zip/Phone #)	- -
PICK-UP	WAIT	MAIL MAIL
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(Be	usiness Entity Name)	
(D	ocument Number)	
•		
Certified Copies	Certificates o	f Status
		
Special Instructions to Fili	ng Officer:	

Office Use Only



300421306483



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE <u>01/10/2024</u>		**WALK IN**
ENTITY NAME Honk	Technologies, Inc.	
DOCUMENT NUMBER	₹	
	PLEASE FILE TA	HE ATTACHED AND RETURN
	Plain Copy	
XXXXXXXX	Certified Copy	
	Certificate of Status	
	Certified Copy of Arts	FOLLOWING FOR THE ABOVE ENTITY** & Amendments & Amendments Complete File (Including Annual Reports)
	Certificate of Status K	Peffecting:
	APOSTILLE' / I	NOTARIAL CERTIFICATION
COUNTRY OF DESTINA	TTION	
NUMBER OF CERTIFICA	ATES REQUESTED	
TOTAL OWED \$ 78.75	5	ACCOUNT # 120140000108 (City) United Corporate Services, Inc. Any issues or concerns, Thank you so much!
Please call Tina at i	the above number for i	any issues or concerns. Thank you so much!

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.

nder the law of which it is incorporated	3			
fact the law of which it is incorporate	d) (FEI number, if applica	ıble)		
incorporation)	(Date of duration, if other than	(Date of duration, if other than perpetual)		
SEE SECTIONS 607.1501 & 6 Spring Ct, Jacksonville, FL, 33	07.1502, F.S., to determine penalty liability) 2246			
·	d office street address)			
Lake Forest, CA 92609 (Current o	nailing address, if different)	~,		
	(P.O. Box NOT acceptable)			
United Corporate Services, Inc.				
3458 Lakeshore Drive				
Tallahassee	, , Florida32312	ا ، د		
(City)	(Zip code)			
as registered agent and to accept solication, I hereby accept the appoint with the provisions of all statu	ointment as registered agent and agree to tes relative to the proper and complete pe	act in this capaci		
	(Date first transacted busin (SEE SECTIONS 607.1501 & 6 Spring Ct, Jacksonville, FL, 3: (Principa Lake Forest, CA 92609 (Current in ddress of Florida registered agent: United Corporate Services, Inc. 3458 Lakeshore Drive Tallahassee (City) 's acceptance: as registered agent and to accept in plication, I hereby accept the appoint of all statu	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Spring Ct, Jacksonville, FL, 32246 (Principal office street address) Lake Forest, CA 92609 (Current mailing address, if different) ddress of Florida registered agent: (P.O. Box NOT acceptable) United Corporate Services, Inc. 3458 Lakeshore Drive Tallahassee , Florida 32312 (City) (City) (Zip code)		

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: Corey Brundage	□Chairman	Name:				
□Vice Chairman		□Vice Chairman	Address:				
□Director	Portsmouth, NH 03801	□Director					
□President		□President					
□Vice President		□Vice President					
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer			
Other	MOther <u>CEO</u>	Other		□Other			
□ Chairman	Name: Dan Rosenthal	□ Chairman	Name:				
□Vice Chairman	Address 4801 48th Street NW Washington DC 20016	□Vice Chairman	Address:				
□Director		Director					
□President	<u> </u>	□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	☐ Secretary		☐ Treasurer			
□Other	─────────────────────────────────────	□Other		Other			
□Chairman	Name: Rob Snodgrass	□Chairman	Name:				
□Vice Chairman	Address 4725 La Villa Marina Unit D	□Vice Chairman	Address:				
□Director	Marina Del Rey, CA 90292	Director					
□President		□President					
⊠ Vice President	VP. People and Talent	□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.							
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. Rob Snodgrass - Vice President, People and Talent
(Typed or printed name and capacity of person signing application)

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

DELAWARE, DO HEREBY CERTIFY "HONK 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 TENTH DAY OF JANUARY, A.D. 2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HONK TECHNOLOGIES, INC." WAS INCORPORATED ON THE SIXTH DAY OF MARCH,

A.D. 2014.

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

Authentication: 202561113

Date: 01-10-24

5493646 8300 SR# 20240079515