Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (614)573-3996 Fax Number

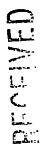
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ____kvandeventer@lenovo.com

FOREIGN PROFIT/NONPROFIT CORPORATION

Lenovo Product Marketplace, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	1)4
Estimated Charge	\$78.75



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.

	Marketplace, Inc.					
(linter name of o "Inc.," "Co.," "Co	orporation: must include "INCORPORATED." "orp." "Inc." "Co." or "Corp.")	ТОМРА	NY," "CORPORATI	ON,"		
(If name unavaila	ible in Florida, enter alternate corporate name ado	pted for	the purpose of transac	ting business in	i Florida)	
Delaware	. 99.		2-3682147			
(State or countr 06/17,2024	y under the law of which it is incorporated)		(FEI number, if	applicable)	· ·	
†Date	of incorporation)	(1)	ate of duration, if oth	er than perpetua	ıl)	
Upon Edling						
	(Date first transacted business in FF (SEE SECTIONS 607.1501 & 607.1502.			pility)		
800) Developine	nt Drive, Morrisville, NC 27560					
	(Principal office s	treet add	iress)			
Name and <u>stree</u> Name:	<u>Laddress</u> of Florida registered agent: (P.O. B <u>C. I. Corporation System</u>	ox <u>NO'</u>	<u>C</u> acceptable)			
flice Address:	1200 South Pine Island Road					
	Plantation	- FL	33324	Ø) ~i	
	(City)	_	(Zip code)	į	101	
Registered age	nt's acceptance:				i i	
aving been names esignated in this erther agree to co	ed as registered agent and to accept service of application, I hereby accept the appointmen omply with the provisions of all statutes relativith and accept the obligations of my positions. SEAN L. EMERICK, ASSISTANT SECRI	t as regi ive to th m as reg	stered agent and ag e proper and comp	tree to actin i	this capacity	
<u>F</u>	By: C T Corporation System		Jan & James			
	(Registered agent's signa	ture)				

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]:

To: * - - Page: 4 of 5 2024-07-22 13 58:26 CST 12122023573 From: David Thomas

A. DIRECTORS							
□Chairman	Name: Kurt Cranor	⊒∈hairman	Name:				
∃Vice Chairman	Address:	D Vice Chairman	Address. 8001 Development Drive Morrisville, NC 27560				
∃ Director	Morrisville, NC 27560	I Director					
™lPresident		TPresident					
Tvice President		TIV ice President					
Tisecretary	"Hireasurer	18ecretary	Threasurer				
囗()ther		□Other					
JChairman	Name:	JChairman	Name:				
Tivice Chairman	Address:	l Vice Chairman	Address:				
IDirector	-1	¬Director					
□President		Il President					
TVice President		⁻ IVice President					
□Secretary	☐ Freasurer	□Secretary	□'l reasurer				
20ther	DOther	HOther	Other				
_l Chairman	Name	_lChairman	Name:				
□Vice Chairman	Address:	コVice Chairman	Address:				
⊒Director		_IDirector					
President		President					
"I Vice President		"IVice President					
⁷ Secretary	Tircasurer	TiSecretary	Theasurer				
□Other		Tother					
Important Notice: Use an attachment to report more than six (b). 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 \$,317,155, F.S.



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LENOVO PRODUCT MARKETPLACE, 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 NINETEENTH DAY OF JULY, A.D. 2024.

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



Authentication: 203968078