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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: | Registration Se Division of Co | | | |
|--|-----------------------------------|--|--|--|
| SLIBJ | ECT: | AEVUS SOFTV | VARE LIMITED INC. | |
| 5000 | | Name of corporati | on - must include suffix | |
| Dear S | Sir or Madam: | | | |
| "Certi | ficate of Existen | tion by Foreign Corporation foce," or "Certificate of Good St gn corporation to transact busi | anding" and check are sub | |
| Please | return all corres | pondence concerning this mat | ter to the following: | |
| MAYI | HARTNETT | | | |
| | | Name o | of Person | |
| MASU | JDA FUNAI EIFE | RT & MITCHELL, LTD. | | |
| | | Firm/Co | ompany | |
| 203 N | LASALLE STRE | EET, SULFE 2500 | | - |
| | | Ad | dress | |
| CHIC | AGO, IL 60601 | | | |
| | | City/State | and Zip code | • |
| MHAI | RTNETT@MASU | | | |
| | | E-mail address: (to be use | d for future animal report i | notification) |
| For tu | rther information | concerning this matter, please | e call; | |
| MAYI | HARTNETT | at (312 | 245-7493 | |
| | Name of Perso | | | shone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | Registration S Division of C P.O. Box 632 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | |
| Please | | the following amount: le to: FLORIDA DEPARTME? \$78.75 Filing Fee & Certificate of Status | NT OF STATE \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certificate of Status δ 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.

| L. | AEVUS SOFTWARE LIN | AITED INC. | |
|---|---|---|------------------|
| (Enter name of c | orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.") | " "COMPANY," "CORPORATION." | |
| N/A | | | |
| (If name unavail | able in Florida, enter alternate corporate name | adopted for the purpose of transacting busin | iess in Florida) |
| 2. DELAWARE | 3 | 61-2104062 | |
| (State or country under the law of which it is incorporated) | | (FEI number, if applicable | c) |
| 96/30/2023 4. 5 | | PERPETUAL | |
| (Date of incorporation) (Date of duration, if other than perpetua | | | |
| 6. n/a | | | |
| 7. 111 CONGRESS | (SEE SECTIONS 607.1501 & 607.1 AVENUE, SUITE 500, AUSTIN, TX, 78701 | n Florida, if prior to registration) 502, F.S., to determine penalty liability) ice street address) | |
| 111 CONGRESS | S AVENUE, SUITE 500, AUSTIN, TX, 7870 | | |
| | (Current maili | ng address, if different) | 2024 067 - |
| 8. Name and street | et address of Florida registered agent: (P.C |). Box NOT acceptable) | 30 |
| Name: | CT CORPORATION SYSTEM | | - 9 |
| Office Address: | 1200 SOUTH PINE ISLAND ROAD | |) |
| | PLANTATION | , Florida ³³³²⁴ | 9: 04 |
| | (City) | (Zip code) | 40 |
| | | | |

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.

| CT CORPORA | ATION SYSTEM | |
|------------|--------------------------------|--|
| By: | and telled | |
| | (Registered agent's signature) | |

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 JASON THOMAS WILCOCK Name: CRAIG MOSS ■ Chairman □ Chairman Address: 111 CONGRESS AVENUE Address: 111 CONGRESS AVENUE □Vice Chairman □ Vice Chairman SUITE 500 SUITE 500 ■ Director Director AUSTIN, TX 78701 AUSTIN, TX 78701 □ President President □ Vice President ☐ Vice President ______ ∐Treasurer ∐Treasurer ■Secretary □Other _____ □ Other _____ □Other ______ □ Chairman [Chairman Name: Name: Address: □ Vice Chairman Address: □ Vice Chairman □ Director □ Director ∟ President ∐President 🗆 Vice President □Vice President □Treasurer □ Secretary □Treasurer □Sccretary □Other _____ □Other _____ □Other____ Name: ______ □ Chairman Name: _____ □ Chairman L Vice Chairman Address. ∐Vice Chairman Address: _____ □ Director □Director ☐ President □President □ Vice President ☐ Vice President □ Secretary □Treasurer ☐ Secretary □Treasurer ☐Other _____ ∐Other _____ U0ther _____ 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.

The officer or director signing this document (and who is fisted 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.

CRAIG MOSS, DIRECTOR, PRESIDENT & SECRETARY

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "AEVUS SOFTWARE LIMITED" 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 SEVENTH DAY OF OCTOBER, 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 "AEVUS SOFTWARE LIMITED" WAS INCORPORATED ON THE THIRTIETH DAY OF JUNE, A.D. 2023.

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

at corp. delaware gov/auth

Authentication: 204570697

Date: 10-07-24