PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR (97) REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

97 NOV 25 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000002538

1. Corporation Name
U3S Corporation of America

Principal Place of Business | Mailing Address

REINSTATEMENT 97
G. Allen 11/25/97

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
595 MARKET ST, 8th FLOOR
Suite, Apt. #, etc.
City & State: SAN FRANCISCO CA
Zip: 94105 Country: USA

3. New Mailing Office Address, If Applicable
595 MARKET ST, 8th FLOOR
Suite, Apt. #, etc.
City & State: SAN FRANCISCO CA
Zip: 94105 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 5-16-94

5. FEI Number: 06-1207237 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Chmn of the Board	Axel Poniatowski director	173, bd Haussman	75415 Paris Cedex 08 France
President & CEO	Benjamin Goodwin director	5040 Shoreham Place	San Diego CA 92122
Secretary	Jean-Francois Courtines director	173, bd Haussman	75415 Paris Cedex 08 France
CFO	Jean-Louis Amelon (officer only)	595 Market St, 8th Floor	San Francisco, CA 94105
Asst Secty	Georgeanna Ubois	595 Market St, 8th Floor	San Francisco, CA 94105
Director	Jean-Michel Barbier	173, bd Haussman	75415 Paris Cedex 08 France

8. Name and Address of Current Registered Agent

CT Corporation System
c/o CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number Not Acceptable)
Suite, Apt. #, Etc.
City | State: FL | Zip Code

100000365057--0
-12/02/97--01051--001
****750.00 ****750.00

CR2E040 (12/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Connie Bryan
CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
REGISTERED AGENT MUST SIGN
Date: 11/26/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☑ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Asst Secretary 10-97 415-543-0900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #