Apr 05, 2000 8:00 am Secretary of State OCUMENT # F97000002905 1. Entity Name QUALCOMM Incorporated 04-05-2000 90105 019 ***150.00 Mailing Address Principal Place of Business 5775 Morehouse Drive 5775 Morehouse Dr., L-707E San' Diego, CA 92121 San Diego, CA 92121 932782 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number Not Applicable 95-3685934 Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Corporation Service Company 1201 Hays Street Street:Address:(P.O. Box Number is Not Acceptable) Tallahassee, FL 32301-2525 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Change ☐ Addition TITLE □ Delete President NAME NAME Richard Sulpizio STREET ADDRESS STREET ADDRESS 5775 Morehouse Drive San Diego, CA 92121 CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change Chief Finaicial Officer ☐ Delete TITLE NAME Anthony S. Thornley STREET ADDRESS STREET ADDRESS 5775 Morehouse Drive CITY-ST-ZIP CITY-ST-ZIP San Diego, CA 92121 ☐ Addition Change TITLE THIE Secretary ☐ Delete NAME NAME Fra<u>nk</u> R<u>ogozien</u>ski STREET ADDRESS STREET ADDRESS 5775 Morehouse Drive CITY-ST-ZIP ' CITY-ST-ZIP San Diego, CA 92121 Addition Change Chairman of the Board ☐ Delete TITLE TITLE NAME NAME Irwin M. Jacobs STREET ADDRESS STREET ADDRESS 5775 Morehouse Drive CITY-ST-ZIP CITY-ST-ZIP San Diego, CA 92121 TITLE Change Addition Director ☐ Delete TITLE Adelia A. Coffman NAME NAME STREET ADDRESS 4902 McLaughlin Drive STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Central Point, OR 97502 Change Addition TITLE TITLE Director Delete NAME NAME Diana Lady Dougan STREET ADDRESS STREET ADDRESS 1800 K Street, NW, Su Washington D.C. 20006 Suite 620 CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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nent with an address, with all other like empowered.

Richard Sulpizio, President 3/22/00 (858) 651-2146

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