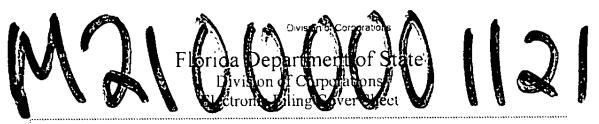
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Division of Corporations

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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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Foreign Limited Liability Company GLASS, LEWIS & CO., LLC

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Division of Corpora	tions		
Glass, Lewis & SUBJECT:	Co., LLC		-
	Name	of Limited Liability Company	
The enclosed "Application by Existence, and check are subm	Foreign Limited Liability (nitted to register the above r	Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.	" Certificate of iness in Florida
Please return all corresponden	ce concerning this matter to	o the following:	
		Name of Person	-
		Firm/Company	-
		· mis output,	
		Address	-
	c	ity/State and Zip Code	-
	E-mail address: (to be	used for future annual report notification)	-
For further information conce	rning this matter, please cal	N:	
		at ()	
Nar	ne of Contact Person	Area Code Daytime Telephone Number	. 2.1
Mailing Address: Registration Secti	on	Street Address: Registration Section	:
Division of Corpo	orations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 3			٥.
	For the following amount: ayable to: FLORIDA DEF e S130.00 Filing Fe Certificate of	PARTMENT OF STATE e & \$155.00 Filing Fee & \$160.00 Filing Fee	

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Glass, Lewis & Co., LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, onter alternate name adopted for the purpose of transacting business in Florids. The alternate name must include "Limited Lisbility Company," "L.L.C," or "LLC.") 04-3737021 Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) Suite 1100 255 California Street (Mailing Address) (Street Address of Principal Office) San Francisco, CA 94111 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: 32301 Tallahassee , Florida Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company 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. Corporation Service Company By: (Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

tle or Capacity;	Name and Address:	Title or Capacit	Y:	Name and Address
Manager	Name:	□Manager	Name:	
Member	Address: 255 California Street	□Member	Address:	
Authorized	Suite 1100 Ban Francisc	○ □Authorized		
Person	CA94111	Person		
Other	Other	Other		Other
Manager	Name:	□Manager	Name:	
Member	Address:	□Member	Address:	
Authorized		□Authorized	 	
Person		Person		127
Other	Other	Other		□ Other
				.ss -2
Manager	Name:	_ Manager	Name:	
Member	Address:	_	Address:	
Authorized				
Person		Person		
Other	Other	Other		Other

- jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

·	(Washington	
	Signature of an authorized person	
	Kathryn Nichol Garzon	
	Typed or printed name of signoc	



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLASS, LEWIS & CO., LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GLASS, LEWIS & CO., LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JANUARY, A.D. 2003.

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

Authentication: 202379044

Date: 01-27-21

3617729 8300 SR# 20210238119