

8/11/2021

Division of Corporations

Florida Department of State
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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
Fax Number : (954)208-0845

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

Email Address: _____

Foreign Limited Liability Company
LIVEWIRE EV, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

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TALLAHASSEE, FLORIDA

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Aug 11, 2021

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. LiveWireEV, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware 3. 86-284324
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Date of Registration
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3700 West Juneau Avenue 6. 3700 West Juneau Avenue
(Street Address of Principal Office) (Mailing Address)

Milwaukee, Wisconsin 53208 Attn: Legal Department
Milwaukee, Wisconsin 53208

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System
Office Address: 1200 South Pine Island Road
Plantation 33324
(City) (Zip code)

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.

By: Tracy Kellner C T Corporation System Tracy Kellner- Assistant Secretary
(Registered agent's signature)

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2021 AUG 12 PM 4:06
CLERK OF DISTRICT COURT
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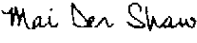
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Jochen Zeitz</u>	<input type="checkbox"/> Manager	Name: <u>Ryan Morrissey</u>
<input type="checkbox"/> Member	Address: <u>3700 West Juneau Avenue</u>	<input type="checkbox"/> Member	Address: <u>3700 West Juneau Avenue</u>
<input checked="" type="checkbox"/> Authorized	<u>Milwaukee, Wisconsin 53208</u>	<input checked="" type="checkbox"/> Authorized	<u>Milwaukee, Wisconsin 53208</u>
Person	_____	Person	_____
<input checked="" type="checkbox"/> Other <u>CEO</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>COO</u>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Paul J. Krause</u>	<input type="checkbox"/> Manager	Name: <u>J. Darrell Thomas</u>
<input type="checkbox"/> Member	Address: <u>3700 West Juneau Avenue</u>	<input type="checkbox"/> Member	Address: <u>3700 West Juneau Avenue</u>
<input checked="" type="checkbox"/> Authorized	<u>Milwaukee, Wisconsin 53208</u>	<input checked="" type="checkbox"/> Authorized	<u>Milwaukee, Wisconsin 53208</u>
Person	_____	Person	_____
<input checked="" type="checkbox"/> Other <u>Secretary</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>Treasurer</u>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Mai Der Shaw</u>	<input type="checkbox"/> Manager	Name: <u>Paul D. Hawken</u>
<input type="checkbox"/> Member	Address: <u>3700 West Juneau Avenue</u>	<input type="checkbox"/> Member	Address: <u>3700 West Juneau Avenue</u>
<input checked="" type="checkbox"/> Authorized	<u>Milwaukee, Wisconsin 53208</u>	<input checked="" type="checkbox"/> Authorized	<u>Milwaukee, Wisconsin 53208</u>
Person	_____	Person	_____
<input checked="" type="checkbox"/> Other <u>Assistant Secretary</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>Assistant Secretary</u>	<input type="checkbox"/> Other _____

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.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath 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.

DocuSigned by:

 12F7ACD08A53482...
 Signature of an authorized person
 MaiDerShaw, Assistant Secretary

 Typed or printed name of signer

Attachment to Application for Foreign Limited Liability Company for Authorization to Transact Business in Florida

#8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/manager or persons authorized to manage.

<u>Name / Title</u>	<u>Business Address</u>
Jochen Zeitz, Chief Executive Officer	3700 West Juneau Avenue, Milwaukee, WI 53208
Ryan Morrissey, Chief Operating Officer	3700 West Juneau Avenue, Milwaukee, WI 53208
J. Darrell Thomas, Treasurer	3700 West Juneau Avenue, Milwaukee, WI 53208
Paul J. Krause, Secretary	3700 West Juneau Avenue, Milwaukee, WI 53208
Lynda M. Johnson, Assistant Treasurer	3700 West Juneau Avenue, Milwaukee, WI 53208
Dean A. Dent, II, Assistant Secretary	3700 West Juneau Avenue, Milwaukee, WI 53208
Mai Der Shaw, Assistant Secretary	3700 West Juneau Avenue, Milwaukee, WI 53208
Paul D. Hawken, Assistant Secretary	3700 West Juneau Avenue, Milwaukee, WI 53208

CLERK OF COURT
TALLAHASSEE, FLORIDA

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIVEWIRE EV, 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 ELEVENTH DAY OF AUGUST, A.D. 2021.

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

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TALLAHASSEE, FLORIDA



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SR# 20212951347

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203898166

Date: 08-11-21