

M21000010884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

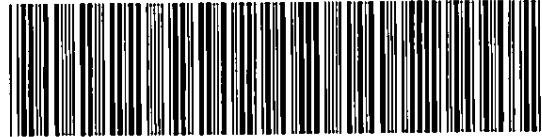
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

w21-113886

Office Use Only



600370282346

RECEIVED

2021 AUG 17 AM 11:46

SECRETARY
TALLAHASSEE, FLORIDA

2021 AUG 17 AM 9:12



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 08/16/2021

Name: Merritt Walker

Reference #: 1453333

Entity Name: TRACE3, LLC

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY OF THE FILING EVIDENCE

**TRACE3, INC. HAS WITHDRAWN.
PLEASE RETAIN THE ORIGINAL
DATE OF SUBMISSION, 8/16/2021**

Authorized Amount: \$155

Signature: *mw*

**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:

1. Trace3, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")

2. California 3. 95-4876514
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. <u>7565 Irvine Center Drive</u> (Street Address of Principal Office)	6. <u>7565 Irvine Center Drive</u> (Mailing Address)
<u>Suite 200</u>	<u>Suite 200</u>
<u>Irvine, CA 92618</u>	<u>Irvine, CA 92618</u>

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

Name: Cogency Global Inc.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

2021 MAR 17 AM 9:12

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.

Messiah Walker, Asst. Secretary
(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]:

Title or Capacity: **Name and Address:**

☒ Manager Name: Rob Wolfson

☐ Member Address: One Sansome Street, 37th Floor

☐ Authorized San Francisco, CA 94104

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Kevin Van Culin

☐ Member Address: One Sansome Street, 37th Floor

☐ Authorized San Francisco, CA 94104

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Lewis Hayes Drumwright

☐ Member Address: 7565 Irvine Center Drive

☐ Authorized Suite 200

Person Irvine, CA 92618

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: Matthew Robinson

☐ Member Address: One Sansome Street, 37th Floor

☐ Authorized San Francisco, CA 94104

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Praneeth Wanigasekera

☐ Member Address: One Sansome Street, 37th Floor

☐ Authorized San Francisco, CA 94104

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Tyler Beecher

☐ Member Address: 7565 Irvine Center Drive

☐ Authorized Suite 200

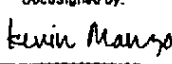
Person Irvine, CA 92618

☐ Other _____ ☐ 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:

 Signature of an authorized person

Kevin Manzo

Typed or printed name of signee

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

Trace3, LLC

8. Manger information Continued:

Title: Manager

Name and Address:

Rich Fennessy

7565 Irvine Center Drive

Suite 200

Irvine, CA 92618



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: TRACE3, LLC
File Number: 201715310248
Registration Date: 06/02/2017
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Jurisdiction: CALIFORNIA
Status: ACTIVE (GOOD STANDING)

As of July 19, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of California
this day of July 20, 2021.

SHIRLEY N. WEBER, Ph.D.
Secretary of State

Certificate Verification Number: ZVEAGQY

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at bebizfile.sos.ca.gov/certification/index.