1. Limited Liability Company Name (Enter the exact name of the LLC. If you registered in California using an alternate name, see instructions.)

SIGNAL MESSENGER, LLC

2. 12-Digit Secretary of State File Number

201808710334

3. State, Foreign Country or Place of Organization (only if formed outside of California)

DELAWARE

4. Business Addresses

a. Street Address of Principal Office - Do not list a P.O. Box
   650 Castro Street, Suite 120-223
   City (no abbreviations) Mountain View
   State CA Zip Code 94041

b. Mailing Address of LLC, if different than item 4a
   650 Castro Street, Suite 120-223
   City (no abbreviations) Mountain View
   State CA Zip Code 94041

c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box
   650 Castro Street, Suite 120-223
   City (no abbreviations) Mountain View
   State CA Zip Code 94041

5. Manager(s) or Member(s)

a. First Name, if an individual - Do not complete Item 5b
   Aruna
   Middle Name
   Last Name Harder
   Suffix

b. Entity Name - Do not complete Item 5a

c. Address
   650 Castro Street, Suite 120-223
   City (no abbreviations) Mountain View
   State CA Zip Code 94041

6. Service of Process (Must provide either Individual OR Corporation.)

   INDIVIDUAL – Complete Items 6a and 6b only. Must include agent’s full name and California street address.

   a. California Agent’s First Name (if agent is not a corporation)
      Aruna
      Middle Name
      Last Name Harder
      Suffix

   b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box
      650 Castro Street, Suite 120-223
      City (no abbreviations) Mountain View
      State CA Zip Code 94041

   CORPORATION – Complete item 6c only. Only include the name of the registered agent Corporation.

   c. California Registered Corporate Agent’s Name (if agent is a corporation) – Do not complete Item 6a or 6b

7. Type of Business

a. Describe the type of business or services of the Limited Liability Company
   mobile apps for secure communication

8. Chief Executive Officer, if elected or appointed

a. First Name
   Moxie
   Middle Name
   Last Name Marlinspike
   Suffix

b. Address
   650 Castro Street, Suite 120-223
   City (no abbreviations) Mountain View
   State CA Zip Code 94041

9. The Information contained herein, including any attachments, is true and correct.

   Date: 10/03/2018
   Aruna Harder
   Chief Operating Officer

   Type or Print Name of Person Completing the Form
   Name:
   Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document enter the name of a person or company and the mailing address. This information will become public when filed. SEE INSTRUCTIONS BEFORE COMPLETING.)

   Name: ____________________________
   Company: ____________________________
   Address: ____________________________
   City/State/Zip: ________________________