No Filing Fee (See Instructions)	ID Number: <u>946775</u>	
Office of the Se Division of Bus 148 W. R	D PROVIDENCE PLANTATIONS ecretary of Stale siness Services iver Street Island 02904-2615	
APPLICATION FOR TRANSFER OF AUTHORITY		
Motivate International Inc.		
(Insert full name of the entity following the transfer)		
SECTION I: TO BE COMPLETED BY ENTITY TRANSFERRING AUTHORITY $\bigotimes_{r_1}^{\infty} < \sum_{r_1}^{\infty}$		
Pursuant to the applicable provisions of the Rhode Island General Laws, 1956, as amended, the undersigned duly qualified foreign (check one box only):		
Non-Profit Corporation or Business Corporation or Limited Liability Company or		
Limited Partnership or Limited Liability Partnership		
submits the following Application for the purpose of transferring its authority to a (check one box only):		
Limited Partnership or Limited Liability Company or E Business Corporation or		
Limited Liability Partnership or Non-Profit Corporation		
a. The name of the entity filing this application for transfer is: Alta Bicycle Share, Inc.		
b. The date on which the entity filing this application qualified to conduct business in the State of Rhode Island: 10/11/2013		
c. The jurisdiction upon transfer of authority: Delaware		
d. The name of the entity following the transfer of authority is:		
Motivate International Inc.		
 The application for transfer is filed as an accompanying certificate to the certificate of registration for a limited partnership or application for registration for a limited liability company or application for certificate of authority for a business corporation or application for certificate of authority for a business corporation or application for certificate of authority for a non-profit corporation or application for certificate liability partnership (check one box only). 		
f. The application for transfer is accompanied by a certificate of good standing or legal existence issued by the proper officer of the state or country under the laws of which it is incorporated.		
Form 612		

Form 612 05/12

FILED APR 17 2015 By <u>241114</u> A.A. 12:08 p.m.

SECTION II: TO BE COMPLETED BY ENTITY TRANSFERRING AUTHORITY

Under penalty of perjury, I/we declare and affirm that I/we have examined this Application for Transfer of Authority, including any accompanying attachments, and that all statements contained herein are true and correct and that the undersigned is authorized to sign this certificate on behalf of the entity set forth in Section 1A.

Dale: March 18, 2014		
Print Name of Other Entity	<u>OR</u>	Print Name of Partnership
By:		Ву:
Signature of Authorized Person		By:Signature of Partner
Ву:		Ву:
Signature of Authorized Person		Signature of Partner
		By:Signature of Partner
Alta Bicycle Strare, Inc.		
Print Mame of Corporation	<u>OR</u>	Print Name of Limited Liability Company
By:		By: Signature of Authorized Person
Jay Walder, President		- Bv [.]
By:Signature of Authorized Person		Signature of Authorized Person



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island

and Providence Plantations, hereby certify that this document, duly executed in

accordance with the provisions of Title 7 of the General Laws of Rhode Island, as

amended, has been filed in this office on this day:

Tulli U. Hole

Nellie M. Gorbea Secretary of State

