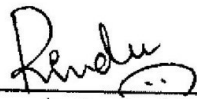


STATE OF DELAWARE  
CERTIFICATE OF FORMATION  
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is Maq AI LLC

2. The Registered Office of the limited liability company in the State of Delaware is located at 8 The Green, Ste A (street), in the City of Dover, Zip Code 19901. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is A Registered Agent, Inc

By:   
Authorized Person

Name: RINDU KANCHANAPALLI  
Print or Type