

SECURITIES & EXCHANGE COMMISSION EDGAR FILING

Mobiquity Technologies, Inc.

Form: D

Date Filed: 2019-04-03

Corporate Issuer CIK: 1084267

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C.

OMB APPROVAL
OMB Number: 3235-0076
Estimated Average burden hours per response: 4.0

1. Issuer's Identity		
CIK (Filer ID Number)	Previous Name(s) None	Entity Type
0001084267	Ace Marketing &	© Corporation
Name of Issuer	Promotions Inc.	C Limited Partnership
Mobiquity Technologies, Inc.	PROMOTIONS INC	C Limited Liability Company
Jurisdiction of Incorporation/Organization		General Partnership
NEW YORK		C Business Trust
Year of Incorporation/Organiza	tion	C Other
Over Five Years Ago		
C Within Last Five Years (Specify Year)		
C Yet to Be Formed		

2. Principal Place of Business and Contact Information						
Name of Issuer						
Mobiquity Technologies, Inc.						
Street Address 1		Stree	et Address 2			
35 TORRINGTON LANE						
City	State/Province/Count	ry	ZIP/Postal Code		Phone No. of Issuer	
SHOREHAM	NEW YORK		11786		516-256-7766	

	_								
Related Per	sor	าร							
Last Name			First Name			IN	Middle I	Name	
Julia			Dean][[
Street Address 1					Street Address 2	2			
35 Torrington Lane									
City			State/Province	Cou	ıntry	Z	ZIP/Pos	tal Code	
Shoreham			NEW YORK				11786		
						-			
Relationship:	V	Execu	tive Officer	V	Director			Promoter	
Clarification of Respons	se (if	Necess	sary)						
Last Name			First Name			ľ	Middle I	Name	
McDonnell			Sean						
Street Address 1					Street Address 2	2			
35 Torrington Lane									
City State/Province/Country		intry	Z	ZIP/Pos	tal Code				
Shoreham NEW YOR		NEW YORK				11786			
						_			
Relationship:	V	Execu	tive Officer	П	Director			Promoter	

_ast Name		First Name			
Trepeta		Sean			
Street Address 1			Street Addres	ss 2	
35 Torrington La	пе				
City		State/Province	e/Country	ZIP/Postal Code	_
Shoreham		NEW YORK		11786	
Relationship:	Execu	ıtive Officer	□ Director	Promoter	
Clarification of Respo	nno (if Nooso	00m/)			
ast Name Arnost Street Address 1 35 Torrington Lat City Shoreham Relationship: Clarification of Response Bauersfeld ast Name	Execu	First Name Thomas State/Province NEW YORK utive Officer sary)	Street Addres e/Country Director	Middle Name SS 2 ZIP/Postal Code 11786 Promoter Middle Name	
Bauersfeld		Paul			
Bauersfeld Street Address 1		Paul	Street Addres	ss 2	
	ne	Paul	Street Addres	as 2	7
Street Address 1	ne	Paul State/Province		SS 2 ZIP/Postal Code	
Street Address 1 35 Torrington Lai	ne				
Street Address 1 35 Torrington Lat	ne	State/Province		ZIP/Postal Code	
Street Address 1 35 Torrington Lat City Shoreham		State/Province		ZIP/Postal Code	
Street Address 1 35 Torrington Lat	Execu	State/Province NEW YORK	e/Country	ZIP/Postal Code	_
Street Address 1 35 Torrington Lat City Shoreham Relationship:	Execu	State/Province NEW YORK	e/Country	ZIP/Postal Code	
Street Address 1 35 Torrington Lat City Shoreham Relationship: Clarification of Response	Execu	State/Province NEW YORK utive Officer sary)	e/Country	ZIP/Postal Code 11786 Promoter	_
Street Address 1 35 Torrington Lan City Shoreham Relationship: Clarification of Responses ast Name	Execu	State/Province NEW YORK utive Officer sary) First Name	e/Country	ZIP/Postal Code 11786 Promoter Middle Name	
Street Address 1 35 Torrington Lat City Shoreham Relationship: Clarification of Responsation Name Salkind	Execu	State/Province NEW YORK utive Officer sary) First Name	Director	ZIP/Postal Code 11786 Promoter Middle Name	
Street Address 1 35 Torrington Lat City Shoreham Relationship: Clarification of Responsast Name Salkind Street Address 1 35 Torrington Lat	Execu	State/Province NEW YORK utive Officer sary) First Name	Director Street Addres	ZIP/Postal Code 11786 Promoter Middle Name	
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Last Name	First Name Middle Name
Katyal	Deepanker
Street Address 1	Street Address 2
35 Torrington Lane	
City	State/Province/Country ZIP/Postal Code
Shoreham	NEW YORK 11786
Relationship: Execu	utive Officer Director Promoter
Clarification of Response (if Neces	sary)
4. Industry Group	Health Care
C Agriculture Banking & Financial Services	C Biotechnology
C Commercial Banking	C Health Insurance C Restaurants
C Insurance	C Pharmaceuticals Technology
C Investing	C Pharmaceuticals C Other Health Care
O Investment Banking	C Telecommunications
C Pooled Investment Fund	Other Technology
Other Banking & Financial C Services	Travel
120	C Manufacturing C Airlines & Airports
C Business Services	Real Estate C Lodging & Convention
Energy C Coal Mining	C Commercial Tourism & Travel
C Electric Utilities	C Construction Services C REITS & Finance C Other Travel
C Energy Conservation	C REITS & Finance C Other Travel C Residential C Other
C Environmental Services	O Other Real Estate
C Oil & Gas	other real Estate
C Other Energy	
5. Issuer Size	
Revenue Range	Aggregate Net Asset Value Range
C No Revenues	C No Aggregate Net Asset Value
C \$1 - \$1,000,000	\$1 - \$5,000,000
© \$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,000
Over \$100,000,000	Over \$100,000,000
C Decline to Disclose	O Decline to Disclose
Not Applicable	O Not Applicable
Not Applicable	Not Applicable
6. Federal Exemptior apply)	n(s) and Exclusion(s) Claimed (select all that
Rule 504(b)(1) (not (i), (ii) or (iii))	□ Rule 505
Rule 504 (b)(1)(i)	⊠ Rule 506(b)
Rule 504 (b)(1)(ii)	Rule 506(c)
Rule 504 (b)(1)(iii)	Securities Act Section 4(a)(5)
	Investment Company Act Section 3(c)

7. Type of Filing
New Notice Date of First Sale 2019-03-20 First Sale Yet to Occur
Amendment
8. Duration of Offering
Does the Issuer intend this offering to last more than one year?
9. Type(s) of Securities Offered (select all that apply)
Pooled Investment Fund
Tenant-in-Common
Securities Option, Warrant or Other Right to
Security to be Acquired
Upon Exercise of Option, Warrant or Other Right to
Acquire Security
10. Business Combination Transaction
Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or C Yes C No
exchange offer? Clarification of Response (if Necessary)
Commence of Newspoints (in Newspoints (in Newspoints)
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11. Minimum Investment
Minimum investment accepted from any \$ 0 USD
Minimum investment accented from any
Minimum investment accepted from any \$ 0 USD
Minimum investment accepted from any succepted from any outside investor
Minimum investment accepted from any outside investor 12. Sales Compensation
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None CRD Number None
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077 Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077 Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077 Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077 Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK
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Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None CRD Number None Alexander Capital, L.P. Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK State(s) of Solicitation All States Foreign/Non-US
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077 Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None CRD Number None Alexander Capital, L.P. Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK State(s) of Solicitation All States Foreign/Non-US
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None CRD Number None Alexander Capital, L.P. Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK State(s) of Solicitation All States Foreign/Non-US
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None CRD Number None Alexander Capital, L.P. Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK State(s) of Solicitation All States Foreign/Non-US 13. Offering and Sales Amounts

14.	Investors	
	Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering	
	Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:	9
15.	Sales Commissions & Finders' Fees Expense	S
	e separately the amounts of sales commissions and finders' fees expenses enditure is not known, provide an estimate and check the box next to the a	
	Sales Commissions \$ 200000 USD	Estimate
	Finders' Fees \$ 0 USD	Estimate
Clarific	cation of Response (if Necessary)	
16.	Use of Proceeds	
payme	te the amount of the gross proceeds of the offering that has been or is properts to any of the persons required to be named as executive officers, direct use to Item 3 above. If the amount is unknown, provide an estimate and che to.	tors or promoters in
	\$ 300000 USD	Estimate
Clarific	cation of Response (if sary)	

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b) (2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Mobiquity Technologies, Inc.	/s/ Dean L. Julia	Dean L. Julia	CEO	2019-04-03



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C.

OMB APPROVAL
OMB Number: 3235-0076
Estimated Average burden hours per response: 4.0

1. Issuer's Identity		
CIK (Filer ID Number)	Previous Name(s) None	Entity Type
0001084267	Ace Marketing &	© Corporation
Name of Issuer	Promotions Inc.	C Limited Partnership
Mobiquity Technologies, Inc.	PROMOTIONS INC	C Limited Liability Company
Jurisdiction of Incorporation/Organization		General Partnership
NEW YORK		C Business Trust
Year of Incorporation/Organiza	tion	C Other
Over Five Years Ago		
C Within Last Five Years (Specify Year)		
C Yet to Be Formed		

2. Principal Place of Business and Contact Information						
Name of Issuer						
Mobiquity Technologies, Inc.						
Street Address 1		Stree	et Address 2			
35 TORRINGTON LANE						
City	State/Province/Count	ry	ZIP/Postal Code		Phone No. of Issuer	
SHOREHAM	NEW YORK		11786		516-256-7766	

Related Per	sor	IS .							
Last Name			First Name			Middle Name			
Julia			Dean			L			
Street Address 1			Street Address 2		!				
35 Torrington Lane									
City			State/Province/Country		ZIP/Postal Code				
Shoreham			NEW YORK			11786			
						-			
Relationship: Execu		tive Officer Director		Promoter					
Clarification of Response (if Necessary)									
Last Name			First Name			Middle Name			
McDonnell		Sean							
Street Address 1 Street Address 2									
35 Torrington Lane									
City		State/Province/Country		ZIP/Postal Code					
Shoreham		NEW YORK			11786				
Relationship:	V	Execu	tive Officer	П	Director			Promoter	

Last Name		First Name		Middle Name		
Trepeta		Sean				
Street Address 1			Street Addres	ss 2		
35 Torrington La	ne					
City		State/Province	e/Country	ZIP/Postal Code		
Shoreham		NEW YORK		11786		
Relationship:	Execu	ıtive Officer	□ Director	Promoter		
Clarification of Respo	nnoo (if Noono	00m/)				
ast Name Arnost Street Address 1 35 Torrington Lactity Shoreham Relationship: Clarification of Responsible Bauersfeld ast Name Bauersfeld	Execu	First Name Thomas State/Province NEW YORK Itive Officer sary) First Name	Street Addres //Country Director	Middle Name ZIP/Postal Code 11786 Promoter Middle Name		
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		Paul	Street Addres	es 2		
	ne	Paul	Street Addres	ss 2		
Street Address 1	ne	Paul State/Province		ZIP/Postal Code		
Street Address 1 35 Torrington La	ne					
Street Address 1 35 Torrington Lac	ne	State/Province		ZIP/Postal Code		
Street Address 1 35 Torrington Lad City Shoreham		State/Province		ZIP/Postal Code		
Street Address 1 35 Torrington Lad City Shoreham Relationship:	Execu	State/Province NEW YORK	//Country	ZIP/Postal Code		
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Street Address 1 35 Torrington Lan City Shoreham Relationship: Clarification of Responsation Name Salkind	Execu	State/Province NEW YORK utive Officer sary) First Name	Director	ZIP/Postal Code 11786 Promoter Middle Name		
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Street Address 1 35 Torrington Lac City Shoreham Relationship: Clarification of Responsition of Responsit	Execu	State/Province NEW YORK Itive Officer sary) First Name Gene State/Province NEW YORK Itive Officer sary)	Street Addres	ZIP/Postal Code 11786 Promoter Middle Name 2IP/Postal Code 11786 Promoter Middle Name		
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Street Address 1 35 Torrington Lai City Shoreham Relationship: Clarification of Responsible Street Address 1 35 Torrington Lai City Shoreham Relationship: Clarification of Responsible Shoreham Last Name Last Name Last Name Last Name Last Name Last Name Lavocone Street Address 1	ene Execu	State/Province NEW YORK Itive Officer sary) First Name Gene State/Province NEW YORK Itive Officer sary)	Street Addres Director	ZIP/Postal Code 11786 Promoter Middle Name 2IP/Postal Code 11786 Promoter Middle Name		

Last Name	First Name Middle Name
Katyal	Deepanker
Street Address 1	Street Address 2
35 Torrington Lane	
City	State/Province/Country ZIP/Postal Code
Shoreham	NEW YORK 11786
	<u> </u>
Relationship:	utive Officer Director Promoter
Clarification of Response (if Neces	sary)
4. Industry Group	Health Care
C Agriculture Banking & Financial Services	© Biotechnology
C Commercial Banking	C Health Insurance C Restaurants
C Insurance	C Representations Technology
C Investing	C Pharmaceuticals C Other Health Care
O Investment Banking	C Telecommunications
C Pooled Investment Fund	
Other Banking & Financial C Services	Travel
120	C Manufacturing C Airlines & Airports
C Business Services	Real Estate C Lodging & Conventions
Energy C Coal Mining	C Commercial Tourism & Travel
C Electric Utilities	C Construction Services
C Energy Conservation	REITS & Finance
C Environmental Services	C Residential C Other C Other Real Estate
C Oil & Gas	Other real Estate
Other Energy	
5. Issuer Size	
Revenue Range	Aggregate Net Asset Value Range
C No Revenues	C No Aggregate Net Asset Value
C \$1 - \$1,000,000	\$1 - \$5,000,000
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000
© \$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000
\$25,000,001 - \$23,000,000	V=-,,,
Over \$100,000,000	Over \$100,000,000
C Decline to Disclose	Decline to Disclose
Not Applicable	C Not Applicable
Not Applicable	Not Applicable
6. Federal Exemptior apply)	n(s) and Exclusion(s) Claimed (select all that
Rule 504(b)(1) (not (i), (ii) or (iii))	□ Rule 505
Rule 504 (b)(1)(i)	☑ Rule 506(b)
Rule 504 (b)(1)(ii)	Rule 506(c)
Rule 504 (b)(1)(iii)	Securities Act Section 4(a)(5)
	Investment Company Act Section 3(c)
II .	II III III III III III III III III III

7. Type of Filing
New Notice Date of First Sale 2019-03-20 First Sale Yet to Occur
Amendment
8. Duration of Offering
Does the Issuer intend this offering to last more than one year?
9. Type(s) of Securities Offered (select all that apply)
Pooled Investment Fund Interests Equity
Tenant-in-Common
Securities Option, Warrant or Other Right to
Security to be Acquired
Upon Exercise of Option, Warrant or Other Right to
Acquire Security
10. Business Combination Transaction
Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or C Yes C No
exchange offer? Clarification of Response (if Necessary)
Chamberton of Hooponic (in Necessary)
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11. Minimum Investment
11. Minimum Investment Minimum investment accepted from any \$ 0 USD
Minimum investment acconted from any
Minimum investment accepted from any \$ 0 USD
Minimum investment accepted from any succepted from any outside investor
Minimum investment accepted from any outside investor 12. Sales Compensation
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None CRD Number None
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. 40077 Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code
Minimum investment accepted from any outside investor 12. Sales Compensation Recipient Recipient CRD Number None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. (Associated) Broker or Dealer None Alexander Capital, L.P. Street Address 1 Street Address 2 17 STATE ST. 5TH FL. City State/Province/Country ZIP/Postal Code NEW YORK NEW YORK
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14.	Investors						
	Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering						
	Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:						
15.	Sales Commissions & Finders' Fees Expenses						
	de separately the amounts of sales commissions and finders' fees expenses, if penditure is not known, provide an estimate and check the box next to the amounts	•					
	Sales Commissions \$ 200000 USD	stimate					
	Finders' Fees \$ 0 USD	stimate					
Clarific	cation of Response (if Necessary)						
16.	Use of Proceeds						
payme	de the amount of the gross proceeds of the offering that has been or is propose ents to any of the persons required to be named as executive officers, directors use to Item 3 above. If the amount is unknown, provide an estimate and check that.	or promoters in					
	\$ 300000 USD	E stimate					
Clarific	cation of Response (if sary)						

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b) (2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Mobiquity Technologies, Inc.	/s/ Dean L. Julia	Dean L. Julia	CEO	2019-04-03