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COVER LETTER

TO:	Registration Section Division of Corporati	ons				
SURI	WRIKE, INC.					
SOBO		Name of corporat	ion - must	include suffix		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by ficate of Existence," or referenced foreign corp	"Certificate of Good S	Standing" a	nd check are sul	nct Business in Florida," omitted to register the	
Please	return all corresponder	ce concerning this ma	tter to the	following:		
EKAT	ERINA TUMANOVA, C	ONTROLLER				
	+	Name	of Person			
WRIK	E, INC.					
		Firm/C	ompany	 		
10 AL	MADEN BLVD, 10TH F	LOOR				
		Ac	ldress			
SAN J	OSE CA 95113					
•	·····	City/Stat	e and Zip o	ode	,	
ACCO	UNTING@TEAM.WRI	E.COM				
	E-ı	nail address: (to be use	ed for futur	e annual report	notification)	
For fu	rther information conce	rning this matter, pleas	se call:			
		408	329-2019			
	Name of Person	at (Area C	Code	Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclos	sed is a check for the fo	lowing amount:				
3 \$7 (78.75 Filing Fee & Certificate of Status		5 Filing Fee & ied Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

d 1 1 (m)(onnon AFF		NIV W (CORPORATIO	N7 19		
	J," "COMPAI	NY," "CORPORATIO	N,"		
ble in Florida, enter alternate corporate nan	•	• •	ng business in Florida)		
(State or country under the law of which it is incorporated		(FEI number, if applicable)			
	5				
	<u></u>	(Date of duration, if other than perpetual)			
(Date first transacted business	s in Florida, if p	prior to registration)			
•		determine penaity mabi	iity)		
·		1			
(Prin	cipai office add	aress)			
(Current ma	iling address i	f different)			
(Current mu	ming dadiess, ii	i dinerenty	25 75		
et address of Florida registered agent: ()	P O Roy NO	T accentable)	NOV 2:		
	.0. Box 110	<u>rr</u> uoceptuoie)	/ 23 AM		
	 		2		
17888 67th Court North			10890 117471 110: t		
Loxahatchee		33470	多品 生		
	Flor		113		
	orp." "Inc." "Co," or "Corp.") able in Florida, enter alternate corporate name by under the law of which it is incorporated) (Date first transacted business (SEE SECTIONS 607.1501 & 607.1501 & 607.1501 & form (Pringer and Company of Florida registered agent: (Incorp Services, Inc. 17888 67th Court North	orp." "Inc." "Co," or "Corp.") able in Florida. enter alternate corporate name adopted for 27-301385 3. y under the law of which it is incorporated) 5. (Date first transacted business in Florida, if (SEE SECTIONS 607.1501 & 607.1502, F.S., to ELVD, 10TH FLOOR SAN JOSE CA 95113 (Principal office address of Florida registered agent: (P.O. Box NC InCorp Services, Inc. 17888 67th Court North Loxahatchee	27-3013858 3. (FEI number, if a grader of incorporation) (Date of duration, if other of other periods of transaction) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability of the penalty liability of the second of the		

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Kathy Shin on behalf of InCorp Services, Inc. (Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIKI	ANDREY FILEV						
Chairman	10 ALMADEN BLVD, 10TH FLOOR, SAN JOSE CA 95113						
Address:							
Vice Chai	DIMITRI NIKOULINE						
Address:	10 ALMADEN BLVD, 10TH FLOOR, SAN JOSE CA 95113	· · · · · · · · · · · · · · · · · · ·					
Director	INDRAHIL GUHA						
	10 ALMADEN BLVD, 10TH FLOOR, SAN JOSE CA 95113						
D'actau	RORY O'DRISCOLL						
Director: Address:	10 ALMADEN BLVD, 10TH FLOOR, SAN JOSE CA 95113	20 Z					
		3 E E E E E E E E E E E E E E E E E E E					
B. OFF	ANDREY FILEV	O: 42					
Address:	10 ALMADEN BLVD, 10TH FLOOR, SAN JOSE CA 95113						
	dent:						
Address:							
Secretary:							
Address:	10 ALMADEN BLVD, 10TH FLOOR, SAN JOSE CA 95113						
Treasurer	ANANTH AVVA asurer: 10 ALMADEN BLVD, 10TH FLOOR, SAN JOSE CA 95113						
Address:	If necessary, you may attach an addendum to the application listing additional office						
12	in necessary, you may attach an addendum to the application listing additional office	cers and/or directors.					
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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. ANANTH AVVA, COO / OFFICER							
13	13. (Typed or printed name and capacity of person signing application)						

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WRIKE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WRIKE, INC." WAS INCORPORATED ON THE NINTH DAY OF JULY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

4846382 8300 SR# 20166591530



Authentication: 203317778

Date: 11-10-16

You may verify this certificate online at corp.delaware.gov/authver.shtml