

F19000004385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900334999239

2019 SEP 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

19 SEP 25 PM 1:31:24

Y SCOTT

SEP 26 2019



CT CORP
3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 9/25/2019

Acc#120160000072

W: C SW

Name:	BLUESNAP, INC.
Document #:	
Order #:	12187528

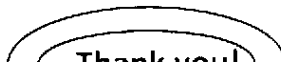
Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

FILED
2019 SEP 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input checked="" type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **87.50**



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLUESNAP, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Christopher Paolillo, Esq.

Name of Person

BLUESNAP, INC.

Firm/Company

800 South St Ste 650

Address

Waltham, MA 02453-1446

City/State and Zip code

christopher.paolillo@bluesnap.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Paolillo, Esq.

781 790-5042
at ()

Name of Person

Area Code

Daytime Telephone 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

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

FILED
2019 SEP 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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.*

1. BLUESNAP, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

California

2. (State or country under the law of which it is incorporated)

3. (FEI number, if applicable)

06-04-2002

4. (Date of incorporation)

5. (Date of duration, if other than perpetual)

8/27/2002

6. (Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

800 South Street, Suite 640, Waltham, MA 02453

7. (Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, 33324

(City)

(Zip code)


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.

C T Corporation System

Christine Kelm
Assistant Secretary

By:



(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.

FILED
2019 SEP 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Matthew Vettel ✓
Address: 1 Liberty Square
Boston, MA 02109

Vice Chairman: _____
Address: _____

Director: Nicholas Cayer ✓
Address: 1 Liberty Square
Boston, MA 02109

Director: Ralph Dangelmaier Jr ✓
Address: 800 South Street, Suite 640
Waltham, MA 02453

B. OFFICERS

President: Ralph Dangelmaier Jr ✓
Address: 800 South Street, Suite 640, Waltham, MA 02453

Vice President: _____
Address: _____

Secretary: Christopher Menard ✓
Address: 800 South Street, Suite 640, Waltham, MA 02453

Treasurer: Christopher Menard ✓
Address: 800 South Street, Suite 640, Waltham, MA 02453

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. [Signature]
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.

13. Christopher Menard, Chief Financial Officer
(Typed or printed name and capacity of person signing application)

FILED
2019 SEP 25 PM 4:45
CLERK OF STATE
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN
FLORIDA**

11.A. cont.

Director: Robert Anderson

Address: 1 Liberty Sq., Boston MA 02109

Director: Brian Golson

Address: Four Embarcadero Center, Suite 3610, San Francisco, CA 94111

Director: Zach Sadek

Address: 1 Federal Street, 21st Floor, Boston, MA 02110

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 SEP 25 PM 4:45

FILED

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

BLUESNAP, INC.

FILE NUMBER: C2428061
FORMATION DATE: 06/04/2002
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

FILED
2019 SEP 25 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of September 20, 2019.

ALEX PADILLA
Secretary of State

DLS