10/12/2017

Division of Corporations

PLEASE HONOR THE DATE HONOR THE DATE OF 10/1/2/2017 13

> Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

> > (((H170002695943)))



H170002695943ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (512)418-6949

Fax Number

: (954)208-0845

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:	
-------	----------	--

## Foreign Limited Liability Company

## PLEASE HONOR THE DATE OF 10/x2/2017

13

Rapid7 LLC

Certificate of Status Certified Copy 0 Page Count 03 \$125.00 Estimated Charge

PLEASE HONOR THE DATE OF 10/1/2/12017

Electronic Filing Menu Corporate Filing Menu

OCT 20 2007 RIS

850-617-6381

10/18/2017 8:15:54 AM PAGE 1/001 Fax Server



October 16, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: RAPID7 LLC REF: W17000082059

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H17000269594 Letter Number: 217A00020777

MITARASCEI CONICA

P.O BOX 6327 - Tallahassee, Florida 32314

i.e

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION (05.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED HABILITY

COMPANY TO TRANSACT BU	ISINESS IN THE STATE OF FLORID.	4:				
1. Rapid? LLC				10 Y ZELB		
(Name of For	eign Limited Liability Company; inc	ist include "Limited Li	fability Company," "L.L.C.," or	"LLC.")		
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpos	se of transacting busin	ess in Florida. The alternate num	ie must includ	ie "Limi	ted
2. Delaware		3. 74-3111935	(FEI number, if applicable)			
(Jurisdiction under the law company is organized)						
4. Upon Qualification				_		
	(Dute first transacted busine (See sections 605,0904 & 605	.0905, F.S. to determi	ne penalty liability)			
5. 100 Summer Street, 13	th Floor, Boston, MA 02110	· · · · · · · · · · · · · · · · · · ·		-		
	(Street Address of	Principal Office)				
6. Same				77 .	2	
· ·			-			tær [
<del></del>	(Mailing	Address)		•		A
		·		; ·		diametric.
7. Name and street addres			4 7 * *			
Name:	C T Corporation System		_	,		•
Office Address:	1200 South Pine Island Road			, 42 ·	$\dot{\vec{c}}$	
	Plantation		, Florida <u>33324</u>	121-	C.5 <b>C</b> /3	
	(City)		(Zip code)	,	. •- •	
designated in this applica- to complywith the provisions of a	tance: gistered agent and to accept ser tion, I hereby accept the appoint ons of all statutes relative to the ny position as registered agent.  CTC  WYO  (Regist	tment as registered proper and complete	agent and agree to act in this te performance of my duties,	s capacity. and I am f	l furthe amiliar	r agree
8. The name, title or capa	city and address of the person(s)	who has/have autho	ority to manage is/are:			
•	r Street, 13th Fl., Boston, MA 07					
	of Rapid7, Inc, member	+ =				
Telef Italian, Del Carry						
			<del></del>			
9. Attached is a certificate jurisdiction under the law of the translator must be su	•	ertificate is in a fore	ign language, a translation of	ustody of re the certifica	cords ir te unde	the oath
	Peter kaes,	Authorized Per	so11			
	F14E3ZSIGHREE	of an authorized perso	onn			
	in accordance with section 605.0 the Department of State constitu				ation	
	Peter Kaes		•			
	Typed or p	rinted name of signoe				

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RAPID7 LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTY-SEVENTH DAY OF JUNE, A.D. 2017.

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

4585320 8300

SR# 20174980419

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

Jeffrey M. Budgets, Sucretary of Side

Authentication: 202791536

Date: 06-27-17