

F/6000000901

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

((H16000050414 3)))



H160000504143ABCV

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 : (850)205-8842  
Fax Number : (850)878-5368

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2016 FEB 26 PM 5:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*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 PROFIT/NONPROFIT CORPORATION  
Cornerstone OnDemand, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	06
Estimated Charge	\$887.50

387.50

150.00 2015 AR  
150.00 2016 AR  
70.00 Filing Fee

\* NOT charging CIVIL Penalty FEE  
Due to 2014 Filing PI4000027561

Electronic Filing Menu Corporate Filing Menu

Help

Per Lyn + Michelle

K. SALY  
EXAMINER  
FEB 29

RECEIVED

2016 FEB 26 PM 4:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2/26/2016 2:28:16 PM From: To: 8506176383( 2/6 )



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TALLAHASSEE, FLORIDA

Cornerstone OnDemand, Inc.

FEIN: 13-4068197

Company Trading Address: 1601 Cloverfield Blvd #600S, Santa Monica, CA 90404

February 19<sup>th</sup>, 2016

Subject: Florida State - Business License

To whom it may concern,

The company would like to qualify the entity as a foreign entity. The company is requesting that "Cornerstone OnDemand, Inc." as a domestic entity be released. The document number of the FL domestic entity is P14000027561.

Sincerely Yours,

Brandon Ulrich

Tax Director (bulrich@csod.com)

+001 310-752-1852



## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Cornerstone OnDemand, 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:

Brandon Ulrich

Name of Person

Cornerstone OnDemand Inc.

Firm/Company

1601 Cloverfield Blvd #600S

Address

Santa Monica, CA 90404

City/State and Zip code

bulrich@csod.com

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

For further information concerning this matter, please call:

Brandon Ulrich

at ( 310 )

752-1853

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

**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. Cornerstone OnDemand, 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)
2. Delaware 3. 13-4068197  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 05/24/1999 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)
6. 03/26/2014  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1601 Cloverfield Blvd #600S, Santa Monica, CA 90404  
(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, FL 33324, Florida \_\_\_\_\_  
(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

By: \_\_\_\_\_

Connie Bryan

Connie Bryan

(Registered agent's signature)

Secretary

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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: Adam Miller

Address: 1601 Cloverfield Blvd #600S, Santa Monica, CA 90404  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: Perry A. Wallack

Address: 1601 Cloverfield Blvd #600S, Santa Monica, CA 90404  
\_\_\_\_\_

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

12. Perry A. Wallack

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. \_\_\_\_\_

(Typed or printed name and capacity of person signing application)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CORNERSTONE ONDEMAND, 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 TWENTY-FIFTH DAY OF FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

FILED  
2016 FEB 26 PM 5:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



3045045 8300

SR# 20161154713

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 201888948

Date: 02-25-16