

ACCOUNT NO.

072100000032

REFERENCE :

634852

4311681

AUTHORIZATION :

COST LIMIT : \$ 70.00 PP/)

ORDER DATE: March 22, 2000

ORDER TIME: 10:28 AM

ORDER NO. : 634852-015

CUSTOMER NO:

4311681

CUSTOMER: Nicole Reese, Legal Asst

Gibson Dunn & Crutcher Llp

200 Park Avenue

48th Floor

New York, NY 101660193

FOREIGN FILINGS

NAME:

CLUBMOM, INC.

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

COWNS 8 EMIS: IS

BECHARD



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TRANSMITTAL LETTER

To: Qualification/Tax Lien Section Division of Corporations	State of the state
SUBJECT: CLUBMOM, II	NC.
	on - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to to transact business in Florida.	
Please return all correspondence concerning this matter	r to the following:
Keith Meyer	
(Name of	f Person)
ClubMom, Inc.	
(Firm/Co	ompany)
462 7th Avenue	e. 9th Floor
(Add	
New York, NY	10018
(City/St	· · · · · · · · · · · · · · · · · · ·
Should you need to call someone concerning this matter	er, please call:
Keith Meyer in (21:	2) 563-2223
(Name of Person) (Area	Code & Daytime Telephone Number)
STREET ADDRESS:	MAILING ADDRESS:
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Qualification/Tax Lien 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 & □ \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified-Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIAN REGISTER A F	ICE WITH SECTION 607.1503, FLORIDA STATU OREIGN CORPORATION TO TRANSACT BUSIN	UTES, THE FOLLOWING IS SUBMITTED TO
1 ClubM	om, Inc.	My College
words or abbro	poration; must include the word "INCORPORATED", " eviations of like import in language as will clearly indicate or partnership if not so contained in the name at present.)	tte that it is a corporation instead of a
2. <u>Delaw</u>	ry under the law of which it is incorporated) 3.	13-4067929
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)
4. July	6, 1999 5. Duration (Duration)	Perpetual : Year corp. will cease to exist or "perpetual")
(D.	ate of incorporation) (Duration	: Year corp. will cease to exist or "perpetual")
6. <u>Upon</u>	filing	
(Date fir	st transacted business in Florida.) (SEE SECTIONS 6	07.1501, 607.1502 and 817.155, F.S.)
7. 462 7	th Avenue, 9th Floor, New York,	NY 10018
	(Current mailing address)	
(Purpose	omote website and sign up members(s) of corporation authorized in home state or country treet address of Florida registered agent: (P.O.	to be carried out in state of Florida)
Name:	Corporation Service Company	
Office Address:	1201 Hays Street	
	Tallahassee	, Florida, 32301 (Zip code)
10. Registered	agent's acceptance:	(Zap code)
with the provision	nerevy accept the appointment as registered agent and	for the above stated corporation at the place designated in d agree to act in this capacity. I further agree to comply formance of my duties, and I am familiar with and accept
11. Attached is a concept of State	certificate of existence duly authenticated, not more that te, by the Secretary of State or other official having cus	n 90 days prior to delivery of this application to the

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

which it is incorporated.

A. DIRECTORS (Street, address only - P.O. Box NOT acceptable)

Chamman	See attached officers/directors rider
Address:	Office and the second s
	8 Tolk
Vice Chairma	n:
	A O
 Director:	· · · · · · · · · · · · · · · · · · ·
Address:	
— Director:	
Address:	
	RS (Street address only - P.O. Box NOT acceptable)
	e attached officers/directors rider
	e attached officers/directors rider
Address:	
Address: Vice President Address: ecretary: Address:	
Address: Vice President Address: ecretary: Address:	
Address: Vice President Address: ecretary: Address: Yeasurer: ddress:	
Address: Vice President Address: ecretary: Address: Yeasurer: ddress:	cessary, you may attach an addendum to the application listing additional officers and/or directors.
Address: Vice President Address: ecretary: Address: reasurer: ddress:	

CLUBMOM, INC.

OFFICERS

NAME **OFFICE ADDRESS**

Michael F. Sanchez President/Director 235 W. 56th St., #31G

New York, NY 10019

Andrew Shue Vice President/Director 49 Park Avenue

New York, NY 10708

William Hoogterp Secretary 51 Richmond Street

Newark, NJ 07103

DIRECTORS

NAME ADDRESS

Dan Nova 2 International Place

Boston, MA 02110

John Fisher 400 Seaport Ct., Ste. 250

Redwood City, CA 94063

State of Delaware

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Office of the Secretary of State

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

AND I DO HEREBY FURTHER_CERTIFY THAT THE ANNUAL REPORTS HAVE

BEEN FILED TO DATE...

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLUBMOM, INC." WAS INCORPORATED ON THE SIXTH DAY OF JULY, A.D. 1999.

Edward J. Freel, Secretary of State

AUTHENTICATION:

0331835

DATE:

03-22-00

3065061 8300

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