# F0800003004

| (Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL |
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|   |
| (Business Entity Name)  |
|   |
| (Document Number)   |
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| Certified Copies Certificates of Status   |
| Certificates of Status  |
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| Special Instructions to Filing Officer:   |
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Office Use Only



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### **COVER LETTER**

| TO: New Filing Section Division of Corporations  |  |  |  |  |
|--|--|--|--|--|
| SUBJECT: A Place for Mom, Inc.   |  |  |  |  |
| (Name of corporation -   | must include suffix)   |  |  |  |
| Dear Sir or Madam:   |  |  |  |  |
| The enclosed "Application by Foreign Corporation for Aut "Certificate of Existence," and check are submitted to registransact business in Florida. |  |  |  |  |
| Please return all correspondence concerning this matter to   | the following:   |  |  |  |
| Breslin Longstreth (Name of Per  |  |  |  |  |
| √(Name of Per  | rson)  |  |  |  |
| V 177. — M   |  |  |  |  |
| (Firm/Compa  | any)   |  |  |  |
| Suite350, 221 1st Ave West  (Address)  Slattle, WA 9819  (City/State and Zip code)   |  |  |  |  |
| (Address)  | )  |  |  |  |
| Slattle, WA 98119  |  |  |  |  |
| (Cify/State and  | Zip code)  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |  |
| BreslinLongstreth at (2014) (Name of Person) (Area Cod   | 285 Helele   |  |  |  |
| (Name of Person) (Area Cod   | e & Daytime Telephone Number)  |  |  |  |
|  |  |  |  |  |
| STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301            | MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |  |  |  |
| Enclosed is a check for the following amount:  |  |  |  |  |
|  | 8.75 Filing Fee & S87.50 Filing Fee, ertified Copy Certificate of Status & Certified Copy        |  |  |  |

# FILE

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

| IN COMPLIANCE                      | E WITH SECTION 607.1503, FLORIDA  | 4 S | TATUTES, THE FOLLOWING IS SUBMIT.<br>RUSINESS IN THE STATE OF FLORIDA         | TED, TO       |
|------------------------------------|---|-----|---|---------------|
| REGISTER A FO                      | REIGN CORPORATION TO TRANSAC  | T   | BUSINESS IN THE STATE OF FLORIDA.   |               |
| 1. A Place for Mor                 | m, Inc.   |     |   | 1 - 1 - 1 - C |
|                                    | corporation; must include "INCORPORATION," "Inc," "Co," or "Corp.")                       | ED  | ," "COMPANY," "CORPORATION,"  |               |
| (If name unavail                   | able in Florida, enter alternate corporate na   | me  | adopted for the purpose of transacting business                               | in Florida)   |
| 2. Delaware                        | •   |     | 912069153   | ٠ <del></del> |
|                                    | under the law of which it is incorporated)  |     | (FEI number, if applicable)   |               |
| 4. February <b>01</b> , 20         | 06  | 5.  | Perpetual   |               |
| (Date                              | e of incorporation)   |     | (Duration: Year corp. will cease to exist or "p                               | erpetual")    |
| 6. February <b>01</b> , 20         | 006   |     |   |               |
| c/o A Place For 7. Seattle, WA 981 | Mom, Inc., Suite 350, 221 1st Avenue Wes  | t   | 502, F.S., to determine penalty liability)  lress)                            | ·             |
| Suite 350, 221 1s                  | st Avenue West, Seattle, WA 98119   |     |   |               |
|                                    | (Current mailing  | add | iress)  |               |
|                                    | Elderly and Persons with Disabilities Elder osell software to help senior living properti |     | re Advisor service to help find appropriate housi manage their sales efforts. | ng for        |
|                                    | s) of corporation authorized in home state o  | ГС  | ountry to be carried out in state of Florida)                                 | <del> </del>  |
| 9. Name and stree                  | et address of Florida registered agent: (   | P.C | ). Box NOT acceptable)  |               |
| Name:                              | Corporation Service Company   |     |   |               |
| Office Address:                    | 1201 Hays Street  |     |   |               |
|                                    | Tallahassee   |     | , Florida 32301   |               |
|                                    | (City)  |     | (Zip code)  |               |
| 10. Registered as                  | gent'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.

Corporation Service Company

By:

(Registered agent's signature)

Ann R. Shilling, Assistant Vice President

11. 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.

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

| Chairman: See attached officers/directors rider              |  |
|--|--|
| Address:   |  |
|  | in the second se |
| Vice Chairman:   |  |
|  | ical Edit  |
| Address:   |  |
| <del></del>  | <b>9冊 2</b>  |
| Director:  |  |
| Address:   |  |
|  |  |
| Director:  |  |
| Address:   |  |
|  |  |
| B. OFFICERS  |  |
| President: See attached officers/directors rider             |  |
| Address:   |  |
|  |  |
| Vice President:  |  |
| Address:   |  |
|  |  |
| Secretary:   |  |
| Address:   |  |
| Treasurer:   |  |
| Address:   | ··· <del>, , · · · · · · · · · · · · · · · ·</del>   |
|  |  |
| NOTE: If necessary, you may attach an addendum to the applic | cation listing additional officers and/or directors.   |
| 13. Signature of Director or Officer listed in               | number 12 of the analization   |
| John Temple (Signature of Director or Officer listed in      | number 12 of the application)  |
| (Typed or printed name and capacity of                       | person signing application)  |

#### OFFICERS/DIRECTORS RIDER

FL-Application by Foreign Corporation for Authorization

A Place for Mom, Inc.

**List of Officers** 

Name: Pamala Temple Title: President

Bus. Addr.: 221 1st Ave West Ste 350, Seattle, WA 98119

Name: John Temple Title: Vice President

Bus. Addr.: 221 1st Ave West Ste 350, Seattle, WA 98119

Name: Brian Trisler Title: Vice President

Bus. Addr.: 221 1st Ave West Ste 350, Seattle, WA 98119

**List of Directors** 

Name: Pamala Temple Term: Dec 31, 2018

Bus. Addr.: 221 1st Ave West Suite 350, Seattle, WA 98119

Name: John Temple Term: Dec 31, 2018

Bus. Addr.: 221 1st Ave West Suite 350, Seattle, WA 98119

Name: Neeraj Agrawal Term: Dec 31, 2018

Bus. Addr.: 930 Winter Street, Suite 2500, Waltham, MA 02451

Name: Mike Martel Term: Dec 31, 2018

Bus. Addr.: 4 Enchanted Wood, San Antonio, TX 78248

Name: Gary Beasley Term: Dec 31, 2018

Bus. Addr.: 148 Waldo Ave, Piedmont, CA 94611

TILED W # 26

# Delaware

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### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "A PLACE FOR MOM, 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 FIFTEENTH DAY OF APRIL, A.D. 2008.

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 "A PLACE FOR MOM, INC." WAS INCORPORATED ON THE FIRST DAY OF FEBRUARY, A.D. 2006.

4103485 8300

080433273

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 6526327

DATE: 04-15-08

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