(Re	equestor's Name)			
(Ac	ldress)			
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(CI	ty/State/Zip/Phon	le #)		
PłCK-UP	WAIT	MAIL		
(P)	siness Entity Na			
(60	isiness Enuty iva	mej		
(Do	cument Number	)		
Certified Copies	Certificate	s of Status		
C., - :-1	Cities Officers			
Special Instructions to Filing Officer:				
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05/24/10--01036--023 \*\*70.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

10 MAY 24 PM 3





### **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Hotchalk 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:			
Kallee Noel			
Name of Person			
Kallee Noel  Name of Person  Hotchalk			
Firm/Company			
1999 S. Bascom Ave Svite 1020			
Address			
Campbell, Ca 95008			
City/State and Zip code			
Kallee noel@hotchalk.com			
Kallee. noel@hotchalk. com  E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Kallee Noel 91 (408 ) 369-9125			
Name of Person Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: MAILING ADDRESS:			
New Filing Section  New Filing Section			
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327			
2661 Executive Center Circle Tallahassee, FL 32314			
Tallahassee, FL 32301			
Enclosed is a check for the following amount:			
\$70.00 Filing Fee \$\sum \text{Status}  \text{\$\sum \text{\$\sum \text{\$\sum \text{Filing Fee} & \sum \$\sum \text{\$\sum \text{\$\sin \text{\$\s			

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

				TATUTES, THE FOLLOWING IS SU BUSINESS IN THE STATE OF FLO		
1 4	Lohelk	Inc.				
(Enter name of c	orporation; must inclu orp," "Inc," "Co," or "	de "INCORPORATE	ED,	" "COMPANY," "CORPORATION,"		şen
						<del>_</del>
(If name unavail	able in Florida, enter a	liternate corporate na	me	adopted for the purpose of transacting b	ousiness in Florida)	)
2. Delawa	re.		3.	47-0940342		•
(State or country	under the law of which	h it is incorporated)		47-0940342 (FEI number, if applica	ıble)	_
(Date	of incorporation)		•	(Duration: Year corp. will cease to ex	ist or "perpetual")	
	3/3	1/10				
	(Date f	rst transacted busines	s i	r Florida, if prior to registration)		
	(SEE SECTI	ONS 607.1501 & 607	7.15	602, F.S., to determine penalty liability)		
7. 1999 5	· Bascon Ave	5 sole 10:	2.0	ress) (ampbell (a 9.500	8	
•		(Principal office a	ıddı	ress)		
		(Current mailing a	ıdd	ress)		
8. Online	Education c	empany wit	7	a tracher that lives	in Florida	house.
(Purpose(s	) of corporation author	rized in hoshe state or	r co	untry to be carried out in state of Florid	a)	
9. Name and stree	t address of Florida	registered agent: (l	P.C	. Box NOT acceptable)	A SE	70
· Name:	(orporeti	n'Service			全常	FIL 10 MAY 24
Name.	- <del> </del>	M SOOIE (	<u>c</u>	mpany	ASSI AA	2 7
Office Address:	1201 Hays	<u> </u>			H <sub>C</sub>	1-9-
	Tallahasse	,		, Florida <u>32301</u> (Zip code)	AC CS	PH O
	7.007702	(City)		(Zip code)		ယ္ ယ
		• • • • • • • • • • • • • • • • • • • •		,	≫'''	=
	gent's acceptance:		•			
maving been nam designated in this	ea as registerea age application. I herel	nt and to accept sell ov accept the appoi	rvio ntn	ce of process for the above stated co went as registered agent and agree t	rporation at the	place wito I
further agree to co	omply with the prov	isions of all statute	s re	lative to the proper and complete p	erformance of n	ry duties,
and I am familiar	with and accept the	obligations of my	po:	sition as registered agent.		
(	A Gu			el, Asst. V.P.	<del></del>	
	// Vicegis	tered agent's signatur	re)			

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:



#### A. DIRECTORS

airman:	10 MAY 24 PM 35 37
Idress:	SECRETARY OF STATE TALLAHASSEE. FLORIDA
ldress:	
·	
	•
1 111 / 010-5	c1020
e President:	
etary:	
ress:	
ress:	
TE: If necessary, you may avach an addendum to the ap	oplication listing additional officers and/or directors.
(Signature of Director or Officer listed	u in number 12 of the application)

# Delaware

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOTCHALK, 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 NINTH DAY OF APRIL, A.D. 2010.

3784897 8300

100291431

Jeffrey W. Bullock, Secretary of State AUTHENTACATION: 7921990

DATE: 04-09-10

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