F11000000540

(Re	questor's Name)	
(Ad	dress)	
•	ĺ	
· (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	☐ MAIL
<u> </u>	_	_
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
\		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
Special instructions to	Filing Officer.	

Office Use Only



200188789242

12/20/10--01020--025 **87.50

W10-58745



T. Burch FEB 9 2011

COVER LETTER

Division	ng Section of Corporations	
SUBJECT:	RECOMMIND, INC.	
	(Name of corporation	on - must include suffix)
Dear Sir or Mada	m:	
	istence," and check are submitted to	Authorization to Transact Business in Florida," register the above referenced foreign corporation to
Please return all e	correspondence concerning this matter	r to the following:
Manre	en arriola	
	(Name o	(Person)
Recom	mind, Inc.	
170 0	Olumbus Owe, Quitė	ompany) , 310
San F	olumbus ave, Suité rancisco, CA 9-	ress) 4133
,		and Zip code)
For further inform	nation concerning this matter, please o	valt:
Maureen	Orrola at 41V	394-7899 X 292 Code & Daytime Telephone Number)
(Name of	Person) (Area	Code & Daytime Telephone Number)
New Filin Division o Clitton Br 2661 Exec	of Corporations	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a chee	k for the following amount:	

S78.75 Filing Fee & Certified Copy

□887.50 Filing Fee, Certificate of Status &

Certified Copy

78.75 Filing Fee & Certificate of Status

☐ \$70.00 Filing Fee



RECEIVED

11 FEB -4 AM IO: 57

FLORIDA DEPARTMENT OF STATE AHASSEE. FLORIDA Division of Corporations

December 21, 2010

MAUREEN ARRIOLA 170 COLUMBUS AVE STE 310 SAN FRANCISCO, CA 94133

SUBJECT: RECOMMIND, INC. Ref. Number: W10000058745

We have received your document for RECOMMIND, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6928.

Tim Burch Regulatory Specialist II

Letter Number: 510A00029479

www.sunbiz.org

Division of Communations D.O. DOV 6997 Mellaharra Elevida 99914

APPLICATION BY EQREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

RECOMMIND LING. Enter make of corporations must include "INCORPORATED." "Inc.," "Co.," "Corp.," "Inc.," "Go.," or "Corp.")	COMPANY CORPORATION.
If name unarabble in Florida, enter alternate corporate name DELAWARE	adopted for the purpose of transacting business in Florida) ————————————————————————————————————
State or country under the taw of which it is incorporated)	(FEL hulmber, strapplicable)
(Date of incorporation)	(Duration: Venctorp, will couse to exist or "perpetual")
(Date first transacted business in	n Florida, il prior to registration)
10 14 2010 (Date first transacted business in (SEE SECTIONS 607, 1501 & 607,	n Florida, il prior to registration) 102, F.S., to determine penalty liability) E 310 CAN FRANCISCO, CA 9413
(Date first transacted business: in (SEE SECTIONS 607,1501 & 607.15 170 COLUMBUS AVE., PUITS (Principal office address of above) (Current mailing address)	in Florida, il prior to registration) 102, F.S., to determine penalty liability) E SID LAN FRANCISCO, CA 9413 ress)
(Date first transacted business: 15 (SEE SECTIONS 607,1501 & 607,15 170 COLUMBUS AVE: PULT (Principal office addresses as above	ress) PELIVERY
(Date limit wanswetch business: in (SEE SECTIONS 607,1501 & 607.15 170 COLUMBUS AVE., PULTI (Principal office address of above) (Current mailing adds) 10FTWARE CALES (ELECTRONIC)	ress) PELIMERY BOX NOT acceptable)
(Date limit wanswetch business in (SEE SECTIONS 607,1501 & 607.1501 (SEE SECTIONS 607,1501 & 607.15	ress) PELIMERY BOX NOT acceptable) FIGURE 10 TEM PROPERTY PRO

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 poshion as registered agent.

Janet Gerkin

(Kleistered agent a kighotore) Special Asst. Secretary

- 11. Attached is a certificate of existence duly authoriticated, 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	
Chairman:	
Address:	
Vice Chairman:	
Address:	<u> </u>
	<u> </u>
Director:	
Address:	
Director:	
Address:	
San Francisco, CA 94122	ncmo, CA 94133
Treasurer:	······································
Address:	
NOTE: If necessary, you may alach an addendum to the application listing additional of	
(Signature of Director or Officer listed in number 12 of the applicate ANNE KROGER / CFO	tion)
(Typed or printed name and capacity of person signing application	n)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "RECOMMIND, 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 THIRTEENTH DAY OF

JANUARY, A.D. 2011.

2011 FC8 -4 PN 4: 41

4433314 8300

101149682

AUTHENTY CATION: 8494726

DATE: 01-13-11

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