

F110000000709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200193595852

02/15/11--01013--011 **70.00

FILED

11 FEB 15 PM 1:16

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
2/16

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CORRELSense, 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:

Oren Elias

Name of Person

CORRELSense, INC.

Firm/Company

111 SPEEN STREET, SUITE 306

Address

FRAMINGHAM, MA 01701

City/State and Zip code

deborah.baker@correlsense.com

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

For further information concerning this matter, please call:

Deborah Baker

Name of Person

at (508) 318-6488

Area Code & 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:

☒ \$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. CORRELSSENSE, 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

(State or country under the law of which it is incorporated)

3. 26-4754384

(FEI number, if applicable)

4. 03/30/2009

(Date of Incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 111 SPEEN STREET, SUITE 306 FRAMINGHAM, MA 01701

(Principal office address)

111 SPEEN STREET, SUITE 306 FRAMINGHAM, MA 01701

(Current mailing address)

8. SALE OF SOFTWARE

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CORPORATION SERVICE COMPANY

Office Address: 1201 HAYS STREET

TALLAHASSEE

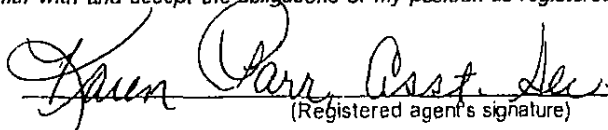
(City)

, Florida 32301

(Zip code)

10. 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.


(Registered agent's signature)

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.

FILED
11 FEB 15 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: SAM SOMECH

Address: 111 SPEEN STREET, SUITE 306

FRAMINGHAM, MA 01701

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: OREN ELIAS

Address: 111 SPEEN STREET, SUITE 306

FRAMINGHAM, MA 01701

Vice President:

Address:

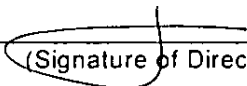
Secretary: OREN ELIAS

Address: 111 SPEEN STREET, SUITE 306, FRAMINGHAM, MA 01701

Treasurer:

Address:

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

13.  (Signature of Director or Officer listed in number 12 of the application)

14. OREN ELIAS
(Typed or printed name and capacity of person signing application)

FILED

11 FEB 15 PM 1:16

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CORRELSSENSE, 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-SECOND DAY OF JANUARY, A.D. 2011.

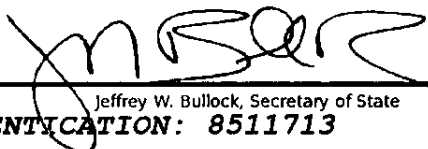
FILED
11 FEB 15 PM 1:16
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

4671497 8300

110030131

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8511713

DATE: 01-22-11