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(F	Requestor's Name)		
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((City/State/Zip/Phone #)		
PICK-UP	WAIT MAIL		
- (i	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions t	to Filing Officer;		
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Office Use Only



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SECRETARY OF STATE
ANASSEE FLORID

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 7, 2011

MELISSA SEVERS 10050 N. WOLFE RD., SW2-130 CUPERTINO, CA 95014

SUBJECT: SUGARCRM INC. Ref. Number: W11000012949



We have received your document for SUGARCRM INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please have a person sign for the corporation listed as the Registered Agent.

Please return the corrected original and one copy of 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) 245-6921.

Maryanne Dickey Regulatory Specialist II Supervisor New Filing Section

Letter Number: 111A00005549

www.sunbiz.org

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COVER LETTER

TO: New Filing Section Division of Corporations						
SUBJECT: SugarCRM 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:						
Melissa Severs						
Name of Person						
SugarCRM Inc.						
Firm/Company						
10050 N Wolfe Rd. SW2-130						
Address						
Cupertino, CA 95014						
City/State and Zip code						
msevers@sugarcrm.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
melissa severs _{at (} 408 ₎ 792-6901						
Name of Person 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 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 & S78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, Certified Copy						

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES. THE FOLLOWING IN SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 1, SugarCRM 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. CA (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 5/25/04 5. PERPETUAL (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 6. <u>1/1/11</u> (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7, 10050 N Wolfe Rd SW2-130, Cupertino CA 95008 (Principal office address) same as above (Current mailing address) sales of CRM software and related professional services (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) InCorp Services Inc Name: 17888 67th Court North Office Address: Loxahatchee (City) 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.

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. DIK	ECTORS	7200		F72.
Chairman	s: Scott Sandell	<u> </u>	芸	17
Address:	10050 n Wolfe Rd SW2-130 Cupertino CA 95014	20.25	ين	1
	·	338	ું જુ	77
Vice Chai	irman: Larry Augustin	FLU	ري در ايجار	ب ب
Address:	10050 n Wolfe Rd SW2-130 Cupertino CA 95014	7.5	500	اسب
,				
Director:	Mary Coleman			•
Address:	10050 n Wolfe Rd SW2-130 Cupertino CA 95014			· · · · · ·
	Manual calls			
	Mark Leslie			
Address:	10050 n Wolfe Rd SW2-130 Cupertino CA 95014	 		
	Director: Josh Stein 10050 n Wolfe Rd SW2-130 Cupertino CA	95014	4	
B. OFF	ICERS			
President:	Larry Augustin	<u></u>	·	
Address:	10050 n Wolfe Rd SW2-130 Cupertino CA 95014			/
			<u></u>	
Vice Presi	ident: n/a		······································	
Address:				
Secretary:	Steve Lance			
-	10050 n Wolfe Rd SW2-130 Cupertino CA 95014			
Treasurer:				
Address:				
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/o	r directo	rs.	
13	Mone			
are true a	Signature of Director or Officer per or director signing this document (and who is listed in number 12 above) affirms that the stand that he or she is aware that false information submitted in a document to the Department of the Felony as provided for in s.817.155, F.S.			

State of California Secretary of State

CERTIFICATE OF STATUS



ENTITY NAME:

SUGARCRM INC.

FILE NUMBER: FORMATION DATE:

C2654200 05/25/2004

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 10, 2011.

DEBRA BOWENSecretary of State