

F11000003461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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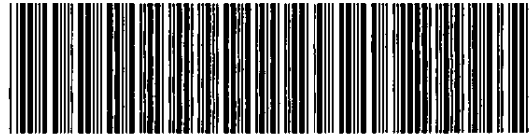
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AUG 26 AM 11:17
SECRETARY OF STATE
TOLSON

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SPLITABLE, 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:

MARY D. FODEN

Name of Person

SPLITABLE, INC.

Firm/Company

3250 NE 1ST AVENUE, STE 305

Address

MIAMI, FL 33137

City/State and Zip code

mary@splitable.com

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

For further information concerning this matter, please call:

MARY FODEN

Name of Person

at (305) 505-2097

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. SPLITABLE, 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. _____

(FEI number, if applicable)

4. 6/15/2011

(Date of incorporation)

5. PERPETUAL

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

6. NO TRANSACTIONS.

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

7. 3250 NE 1ST AVE, STE 305, MIAMI, FL 33137

(Principal office address)

3250 NE 1ST AVE, STE 305, MIAMI, FL 33137

(Current mailing address)

8. E-Commerce, Software as a Service

(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: MARY D. FODEN

Office Address: 3250 NE 1ST AVE, STE 305

MIAMI

(City)

, Florida 33137

(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.

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2011 AUG 26 AM 11:17
CLERK OF THE COURT
JULIA A. HARRIS, CLERK
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Mary Foden

Address: 3250 NE 1st Ave, Ste 305, Miami, FL 33137

Vice Chairman: Erwin Gonzalez

Address: 3250 NE 1st Ave, Ste 305, Miami, FL 33137

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Mary Foden

Address: 3250 NE 1st Ave, Ste 305
Miami, FL 33137

Vice President: _____

Address: _____

Secretary: Mary Foden

Address: 3250 NE 1st Ave, Ste 305, Miami, FL 33137

Treasurer: Erwin Gonzalez

Address: 3250 NE 1st Ave, Ste 305, Miami, FL 33137

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

13. Mary Foden

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Mary Foden, President

(Typed or printed name and capacity of person signing application)

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STATE DEPT.
TALLAHASSEE, FL 32304

Delaware

PAGE 1

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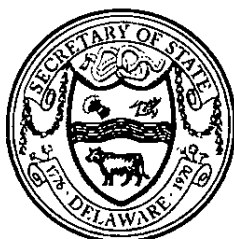
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPLITABLE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF AUGUST, A.D. 2011.


FILED
2PM AUG 26 AM 11:18
410
7/10/2011
10:40:00

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8983374

DATE: 08-22-11