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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
10/5

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** ChicaLogic, 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:

Dorthe Mikkelsen Wright

Name of Person

Martensen Wright PC

Firm/Company

112 J Street, 2nd Floor

Address

Sacramento, CA 95814

City/State and Zip code

dm@usa-eurolaw.com

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

For further information concerning this matter, please call:

Dorthe Mikkelsen Wright

Name of Person

at ( 916 ) 448 9088

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. ChicaLogic, 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. California 3. 27-0944600  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10 September 2009 5. Perpetual  
(Date of incorporation) (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. 8865 N Fuller Avenue, Fresno, CA 93720  
(Principal office address)  
112 J Street, 2nd Floor, Sacramento, CA 95814  
(Current mailing address)

8. Any and all lawful business, including software development  
(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: Lori Raygoza

Office Address: 433 Plaza Real, Suite 275

Boca Raton, Florida 33432  
(City) (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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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Lori Raygoza

Address: 433 Plaza Real, Suite 275  
Boca Raton, FL 33432

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Lori Raygoza

Address: 433 Plaza Real, Suite 275  
Boca Raton, FL 33432

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Edward J. Wright, Jr.

Address: Martensen Wright PC, 112 J St, 2nd Street, Sacramento, CA 95814

Treasurer: Lori Raygoza

Address: 433 Plaza Real, Suite 275, Boca Raton, FL 33432

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

13. Lori Raygoza, President

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. Lori Raygoza, President

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

State of California  
Secretary of State

CERTIFICATE OF STATUS

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ENTITY NAME:

CHICALOGIC, INC.

FILE NUMBER: C3229016  
FORMATION DATE: 09/10/2009  
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 September 21, 2011.

*Debra Bowen*

DEBRA BOWEN  
Secretary of State