

F130000001162 (FAX)

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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

FOREIGN PROFIT/NONPROFIT CORPORATION  
ABOUT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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13 MAR 14 PM 1:54  
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TALLAHASSEE FLORIDA

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TALLAHASSEE FLORIDA

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**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. About, 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. 13-4034015**

(FBI number, if applicable)

**4. 11/17/1998**

(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. 1500 Broadway, Sixth Floor, New York, NY 10036**

(Principal office address)

**1500 Broadway, Sixth Floor, New York, NY 10036**

(Current mailing address)

**8. online search, content and applications**

(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: **NRAI Services, Inc**

Office Address: **1200 South Pine Island Road**

**Plantation**

(City)

Florida **33324**

(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.*

**NRAI Services, Inc.**

(Registered agent's signature)

**Jackie Bernu, Assistant Secretary**

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

## A. DIRECTORS

Chairman: n/a

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

Vice Chairman: n/a


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

Director: Jeffrey KipAddress: 555 West 18th StreetNew York, NY 10011Director: Gregg WiniarskiAddress: 555 West 18th StreetNew York, NY 10011

## B. OFFICERS

President: Scott Kim (Interim President and Chief Executive Officer)Address: 1500 Broadway, Sixth FloorNew York, NY 10036Vice President: Jeff Spitzer (Vice President, Global Controller, and Assistant Treasurer)Address: 555 12th Street, Suite 500Oakland, CA 94607Secretary: Brad Simon (Senior Vice President, General Counsel and Secretary)Address: 1500 Broadway, Sixth Floor, New York, NY 10036Treasurer: Justin Squezzello (Head of Finance, Chief Financial Officer and Treasurer)Address: 1500 Broadway, Sixth Floor, New York, NY 10036

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

13. 

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. Brad Simon (Senior Vice President, General Counsel and Secretary)

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

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FLORIDA

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# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ABOUT, 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 FOURTEENTH DAY OF MARCH, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ABOUT, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF NOVEMBER, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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DELAWARE

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You may verify this certificate online  
at [corp.delaware.gov/authres.shtml](http://corp.delaware.gov/authres.shtml)



Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0283555

DATE: 03-14-13

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