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COVER LETTER

TO:	New Filing Section Division of Corporations
SUR.	ECT: Coratd, Inc.
505	. Name of corporation - must include suffix
Dear S	ir or Madam:
"Certi	closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," icate of Existence," or "Certificate of Good Standing" and check are submitted to register the referenced foreign corporation to transact business in Florida.
Please	return all correspondence concerning this matter to the following:
	Ough Phing Name of Person Corata , Inc. Firm/Company
	Name of Person
	Coratd Inc.
	255 Shordine Dr. Ste 650 Address
	Redwood City CA 94065 City/State and Zip code
	OPhung a corate com Germail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
(Name of Person at (650) 730 - 5132 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
Enclo	ed is a check for the following amount:
□ \$7	.00 Filing Fee Sectificate of Status Sertified Copy Sertified Copy Sertified Copy Sertified Copy Certified Copy 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. Coratel 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) France (State or country under the law of which it is incorporated) 5. (Duration: Year corp. will cease to exist or "perpetual") (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) ordine Dr. Ste 650 (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: Office Address: 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. DIRECTORS
Chairman: Audrey Madean
Address: 255 Shoreline Dr. Ste 650
Reducted City CA 94065
Vice Chairman:
Address:
Director: <u>Peter Bodine</u>
Address: 255 Shoreline Dr Ste 600
Redwood City CA 94065
Director: John Jarve
Address: 255 Shoreline Dr. Ste 65D
Redwood Gy CA 94065
B. OFFICERS
President: Koum Brown CEO
Address: 255 Shoreline Dr. Ste 650
Redwood City CA 94065
Vice President: Stewart Grierson, CFO
Address: 255 Shoreline Dr. Ste 650
Redwood City CA 94065
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. <u>Atemas Grier</u>
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. Stewart Grierson CFO (Typed or printed name and capacity of person signing application)



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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CORAID, 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-FIFTH DAY OF JULY, A.D. 2013.

4759768 8300

130915991

AUTHENTICATION: 0615033

DATE: 07-25-13

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