F14000001352

300258122463

03/24/14--01032--002   **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 MAR 24 PM 4: 03

3/26 CM

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AirTight Networks, 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:

Mark Shamshoian
Name of Person

AirTight Networks, Inc.
Firm/Company

339 N. Bernardo Avenue, Suite 100
Address

Mountain View, CA 94043
City/State and Zip code

mark.shamshoian @ airtightnetworks.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Shamshoian   at (650) 961-1111 x 223

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
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☑ $70.00 Filing Fee   ☐ $78.75 Filing Fee &   ☐ $78.75 Filing Fee &   ☐ $87.50 Filing Fee,
                              Certificate of Status   Certified Copy   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. __AirTight Networks 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. __State of California, USA__   3. __42-1594273__
(State or country under the law of which it is incorporated)   (FEI number, if applicable)

4. __5/7/2003__   5. _____
(Date of incorporation)   (Duration: Year corp. will cease to exist or "perpetual")

6. __2006__
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. __339 N. Bernardo Avenue #200, Mountain View, CA 94043__
(Principal office address)

__Same__
(Current mailing address)

8. __wireless security & compliance products__
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)

Name: __Jack Torgow__

Office Address: __1720 NW 126th Dr.__

__Coral Springs,__ ____ Florida __33071__
(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.

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

A. DIRECTORS

Chairman: __David King__

Address: __339 N. Bernardo Ave., #200__

__Mountain View, CA 94043__

Vice Chairman: _____

Address: _____

_____

Director: _____

Address: _____

_____

Director: _____

Address: _____

_____

B. OFFICERS

President: _____

Address: _____

_____

Vice President: _____

Address: _____

_____

Secretary: __Mark Shamshoian__

Address: __339 N.Bernardo Ave., #200, Mountain View, CA 94043__

Treasurer: _____

Address: _____

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. __Mark Shamshoian, Controller__
(Typed or printed name and capacity of person signing application)

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

AIRTIGHT NETWORKS, INC.

FILE NUMBER: C2536465
FORMATION DATE: 05/07/2003
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 March 18, 2014.

DEBRA BOWEN
Secretary of State

HSD