# F14000003249

| (Red                      | questor's Name)   | · · · · · · · · · · · · · · · · · · · |
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| (Add                      | dress)            |                                       |
| (Add                      | dress)            |                                       |
| (City                     | //State/Zip/Phone | #)                                    |
| PICK-UP                   | ☐ WAIT            | MAIL                                  |
| (Bus                      | siness Entity Nam | ne)                                   |
| (Doc                      | cument Number)    | <u></u>                               |
| Certified Copies          | Certificates      | of Status                             |
| Special Instructions to F | Filing Officer:   |                                       |
|                           |                   |                                       |
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Office Use Only



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ACCOUNT NO. : I2000000195

REFERENCE : 237342 7352525

AUTHORIZATION /

COST LIMIT !

| - | - | - | - | - | <br> | - | - | <br>- | - | <br> | <br> | <br> | <b>-</b> . | <br>_ | _ | - | _ | _ | _ | _ | _ | _ | _ | - | <br>- | <br>- | _ | _ | - | _ | _ | _ | <br>_ | <br> | <br> | ~- | _ | - | _ | <b>-</b> . | _ | - | _ | _ | <br> | <u> </u> | <br> |
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ORDER DATE : July 30, 2014

ORDER TIME : 12:01 PM

ORDER NO. : 237342-010

CUSTOMER NO: 7352525

### FOREIGN FILINGS

NAME: FLAGSHIP ENTERPRISES HOLDING,

INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62925

EXAMINER:

## **COVER LETTER**

| TO: New Filing Section Division of Corporations  |
|--|
| SUBJECT: Flagship Enterprises Holding, 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:  |
| Greg Bogdanovich   |
| Name of Person   |
| Flagship Enterprises Holding, Inc.   |
| Firm/Company   |
| 1050 North Fifth Street, Suite 50  |
| Address  |
| San Jose, CA 95112   |
| City/State and Zip code legal@flagshipinc.com  |
| E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Ana Santiago 408 977-0155 ext 131  |
| 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 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.

| "Inc.," "Co.," "(   | corporation; must include "INCORPORATEI<br>Corp," "Inc," "Co," or "Corp.")  | )," "COMPANY," "CORPORATI  | ON,"   |
|---|---|--|--|
| (If name unavail  | able in Florida, enter alternate corporate nam  | e adopted for the purpose of transac   | ting business in Florida)  |
| California  | 2   | 26-4033257   |  |
| (State or count   | y under the law of which it is incorporated)  | (FEI number, if  | applicable)  |
| Jan 2009  | S   | Perpetual  |  |
| (Date   | of incorporation)   | (Duration: Year corp. will cease   | to exist or "perpetual")   |
| October 1, 201  | 4   |  |  |
|   | (Date first transacted business (SEE SECTIONS 607.1501 & 607.   | in Florida, if prior to registration)<br>1502, F.S., to determine penalty liab   | oility)  |
| 050 North Fifth   | Street, Suite 50 San Jose, CA 95112   |  |  |
|   | (Principal office ad  | dress)   |  |
|   |   |  |  |
| 050 North Fiftl   | Street, Suite 50 San Jose, CA 95112 (Current mailing ad   |  |  |
|   | (Current mailing ad et address of Florida registered agent: (P. Corporation Service Company   | dress)   | 14   |
| Name and <u>stree</u>   | (Current mailing ad et address of Florida registered agent: (P.   | dress)   | TALLA  |
| Name and <u>stree</u><br>Name:  | (Current mailing ad carrent mailing ad address of Florida registered agent: (P. Corporation Service Company 1201 Hays Street Tallahassee  | dress)   | 14 MG-1  |
| Name and <u>stree</u><br>Name:  | (Current mailing ad et address of Florida registered agent: (P. Corporation Service Company 1201 Hays Street  | dress)  O. Box <u>NOT</u> acceptable)  32301   | TA AUG-1 AM  |
| Name and stree<br>Name:<br>ice Address:<br>Registered ago<br>ving been namignated in this                         | (Current mailing ad et address of Florida registered agent: (P. Corporation Service Company  1201 Hays Street  Tallahassee  (City)  ent's acceptance: ed as registered agent and to accept servapplication, I hereby accept the appoint                                       | O. Box NOT acceptable) , Florida 32301, Florida (Zip code)  vice of process for the above sta  | ted corporation at the pla<br>gree to act in this capacity                           |
| Name and stree<br>Name:<br>ice Address:<br>Registered ago<br>ving been nam<br>ignated in this<br>ther agree to co | (Current mailing ad et address of Florida registered agent: (P. Corporation Service Company  1201 Hays Street  Tallahassee  (City)  ent's acceptance: ed as registered agent and to accept service.   | O. Box NOT acceptable)  O. Box NOT acceptable)  Graph of Florida (Zip code)  Fice of process for the above standing agent and agent and agent and agent and compressive to the proper and comp | ted corporation at the pla<br>gree to act in this capacity<br>lete performance of my |
| Name and street Name: ice Address: Registered ago ving been nam ignated in this ther agree to co ies, and I am f  | (Current mailing ad et address of Florida registered agent: (P. Corporation Service Company  1201 Hays Street  Tallahassee  (City)  ent's acceptance: ed as registered agent and to accept servapplication, I hereby accept the appointment of the provisions of all statutes | O. Box NOT acceptable)  O. Box NOT acceptable)  Graph of Florida (Zip code)  Fice of process for the above standing agent and agent and agent and agent and compressive to the proper and comp | ted corporation at the pla<br>gree to act in this capacity<br>lete performance of my |

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: \_\_\_ Vice Chairman: Address: Address: \_\_\_\_ B. OFFICERS President: David Pasek 1050 North Fifth Street, Suite 50 Address: San Jose CA 95112 Secretary: Katheryn Pasek 1050 North Fifth Street, Suite 50 Address: San Jose CA 95112 Treasurer: Address: NOTE: If necessary, you may attach an addendum-to the application listing additional officers and/or directors. 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. 13. David Pasek

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

## State of California

## Secretary of State

CERTIFICATE OF STATUS

#### ENTITY NAME:

FLAGSHIP ENTERPRISES HOLDING, INC.

FILE NUMBER: FORMATION DATE:

C3183464

TYPE:

01/01/2009 DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

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SHEET OF

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 July 30, 2014.

DEBRA BOWEN
Secretary of State