

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205-8842

Fax Number

: (850)878-5368

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 RadPad, Incorporated

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: RadPad, Incorporated	
	tion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact bu	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
Rita Ravindra	•
Name	of Person
RadPad, Incorporated	
Firm/0	Company
506 Santa Monica Blvd., #322	
A	ddress
Santa Monica, CA 90401	
City/Sta	te and Zip code
rita@onrudpad.com	
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, plea	se call:
Rita Ravindra at (744-8021
	rea 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:	
S70.00 Filing Fee S78.75 Filing Fee & Certificate of Status	© \$78.75 Filing Fee & C \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

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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.

(If name unavailable	in Florida, enter alternate corporate name a	depted for the pur	pose of transacting b	usiness in Florida)
Delaware	3.			
(State or country un	der the law of which it is incorporated)		FEI number, if applie	able)
July 23, 2012	5.	perpetual		
(Date of i	ncorporation)	(Duration: Year	corp. will cease to ex	ist or "perpetual")
	(Date first transacted business in (SER SECTIONS 607.1501 & 607.15	Florida, if prior to 02, F.S., to determ	registration) tine penalty liability)	
506 Santa Monica Blv	d., #322, Santa Monica, CA 90401			
	(Principal office addr	558)		<u> </u>
506 Santa Monica Bl	vd., #322, Santa Monica, CA 90401			25
	(Current mailing addr	css)		201
Name and atreet ad	dress of Florida registered agent: (P.C	.Box NOT acc	eptable)	9
Name:	C T Corporation System			98
140,000.	1200 South Pine Island Road			受制
ffice Address:	1200 10001 2 200 101010 20001		•	
	Plentation	, Florida	33324	
_	(City)	((Zip code)	

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.

4/29/2015 11:23:42 AM From: To: 8506176381(4/5)

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 Names and business addresses of officers and/or dire 	ctors:
--	--------

15 APR 29 PH 12: 20

A. DIRE	Jonathan Eppers	SECRETARY O
	506 Santa Monica Blvd., #322, Santa Monica, CA 90401	A STATE OF THE STA
Vice Chair	men:	
Address:		·
Director:	Tyler Galpin	
Address:	506 Santa Monica Blvd., #322, Santa Monica, CA 90401	
Director	Vedim Taraso∨	
	506 Sunta Monica Blvd., #322, Santa Monica, CA 90401	
B. OPFI	CERS	
President:	Jonathan Eppers	
Address:	506 Santa Monica Blvd., #322, Santa Monica, CA 90401	
	Jent:	
Address: _		
Secretary:	Jonathan Eppers	
	506 Santa Monica Blvd., #322, Santa Monica, CA 90401	
Treasurer:	Jonathan Eppera	
	506 Santa Monica Blvd., #322, Santa Monica, CA 90401	
12 0	Singueseary, you may attach an addendum to the application listing additional officers and/or dire	ctors.
The office	Signature of Director or Officer or or director signing this document (and who is listed in number 12 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of Sugree felony as provided for in s.817.155, F.S.	
13. Jonat	han Eppers, Chief Executive Officer	
·	(Typed or printed name and capacity of person signing application)	· · · · · · · · · · · · · · · · · · ·



Delaware 15 APR 29 PM 12: 20 PAGERE TARY OF STATE

PAGERE AMY OF STATE TALLAHASSEE FLORIDA

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RADPAD, INCORPORATED" 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-NINTH DAY OF APRIL, A.D. 2015.

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.

8300

150582789

You may verify this cortificate coline at corp.delaware.gov/authver.shtml

Janiey W. Bullock, Secretary (CATION: 2332274

DATE: 04-29-15