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Florida Department of State  
Division of Corporations  
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FOREIGN PROFIT/NONPROFIT CORPORATION  
Hyperlocal Corporation

Certificate of Status	0
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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Hyperlocal Corporation

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:

Sharon Moy

Name of Person

Paul Hastings LLP

Firm/Company

71 S. Wacker Drive, 45th Floor

Address

Chicago, IL 60606

City/State and Zip code

judelhofen@madison.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharon Moy

at ( 312 ) 499-6086

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 & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, 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. Hyperlocal Corporation

(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. Georgia

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. June 1, 2015

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon registration

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

7. 500 West Madison Street, Suite 3890, Chicago, Illinois 60661

(Principal office address)

500 West Madison Street, Suite 3890, Chicago, Illinois 60661

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida

33324

(Zip code)

9. 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.*

C T Corporation System

By: James M. Halpin

James M. Halpin

Assistant Secretary

(Registered agent's signature)

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.

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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Chairman: Larry Gies

Address: 500 West Madison Street, Suite 3890, Chicago, Illinois 60661

Vice Chairman: \_\_\_\_\_

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

Director: Christopher Domke

Address: 500 West Madison Street, Suite 3890, Chicago, Illinois 60661

Director: Aaron Van Getson

Address: 500 West Madison Street, Suite 3890, Chicago, Illinois 60661

**B. OFFICERS**

President: See attached list.

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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

12. 

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. Aaron Van Getson, Vice President and Assistant Secretary

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

6/3/2015 3:22:22 PM From: To: 8506176381( 5/6 )

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Attachment to  
Application by Foreign Corporation for Authorization to Transact Business in Florida  
for  
Hyperlocal Corporation**

**11B. Names and business addresses of officers:**

Title	Name	Address
President and Chief Executive Officer	Gary Mulloy	500 West Madison Street, Suite 3890 Chicago, Illinois 60661
Senior Vice President, Chief Financial Officer, Treasurer and Secretary	Ryan Carr	500 West Madison Street, Suite 3890 Chicago, Illinois 60661
Vice President and Assistant Secretary	Aaron Van Getson	500 West Madison Street, Suite 3890 Chicago, Illinois 60661

## STATE OF GEORGIA

Secretary of State  
Corporations Division  
313 West Tower  
#2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

CONTROL NUMBER : 15054153  
DATE INC/AUTH/FILED : June 01, 2015  
JURISDICTION : Georgia  
PRINT DATE : June 03, 2015

### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**Hyperlocal Corporation**  
**A Domestic For-Profit Corporation**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Tracking #: stjAc/N8

*B. P. Kemp*

Brian P. Kemp  
Secretary of State

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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