

F150002041243
Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

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TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

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FOREIGN PROFIT/NONPROFIT CORPORATION

3 Commas 1 Period Co

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

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Corporate Filing Menu

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AUG 25 2015
D. BRUCE

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 3 Commas 1 Period Co

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:

Jennifer Quilon Consul

Name of Person

c/o Wilson Sonsini Goodrich & Rosati, P.C.

Firm/Company

12235 El Camino Real, Suite 200

Address

San Diego, CA 92130

City/State and Zip code

Austin Cohen: austincohen@wsg.com

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

For further information concerning this matter, please call:

Jennifer Quilon Consul

at (858) 350-2217

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

2015 AUG 24 AM 10 24
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TALLAHASSEE, FLORIDA

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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.**

1. 3 Commas 1 Period Co
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Delaware
(State or country under the law of which it is incorporated)
3. _____
(FEI number, if applicable)
4. 11/24/2014
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2001 Meridian Avenue, PH3, Miami, FL 33139
(Principal office address)
2001 Meridian Avenue, PH3, Miami, FL 33139
(Current mailing address)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (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.

CT Corporation System Agnes B. Agnes Broszczak,
By: _____ Asst 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Austin Cohen

Address: 2001 Meridian Avenue, PH3, Miami, FL 33139

Director: _____

Address: _____

B. OFFICERS

President: Austin Cohen

Address: 2001 Meridian Avenue, PH3, Miami, FL 33139

Vice President: _____

Address: _____

Secretary: Austin Cohen

Address: 2001 Meridian Avenue, PH3, Miami, FL 33139

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. Austin Cohen, President and Chief Executive Officer

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

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2015 AUG 24 A 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/24/2015 2:29:48 PM From: To: 8506176383(5/6)

**APPLICATION BY FOREIGN CORPORATION
TO TRANSACT BUSINESS IN FLORIDA - ADDENDUM**

3 Commas 1 Period Co

(continuation of Officers):

11B. Chief Executive Officer: Austin Cohen

Address: 2001 Meridian Avenue, PH3, Miami, Florida 33139

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2015 AUG 24 A 10 24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "3 COMMAS 1 PERIOD CO" 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-FIRST DAY OF AUGUST, 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.



5645354 8300

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2668397

DATE: 08-21-15