

F15000003776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

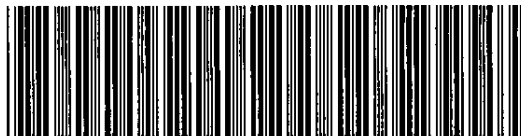
(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 26 2015

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2015

ALEJANDRO SINTAS
1225 SW 94 AVENUE
MIAMI, FL 33174

SUBJECT: LIFESEND, INC.
Ref. Number: W15000052770

We have received your document for LIFESEND, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason
Regulatory Specialist II

Letter Number: 715A00016488

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lifesend, 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:

Alejandro Sintas

Lifesend, Inc.
Lifesend, Inc

Name of Person

Firm/Company

1225 SW 94 Ave,

Address

Miami, FL 33174

City/State and Zip code

Rherrero@ralco.org

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

For further information concerning this matter, please call:

Raul Herrero

305

305 793 7272

at ()

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

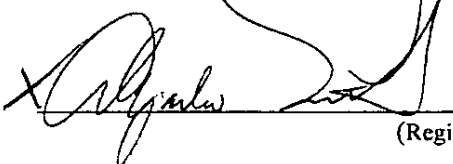
☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$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. ~~Lifesend, Inc.~~ LifeSensed, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.") Raul Herrero GAVE
LifeSensed FL, Inc. AUTHORIZATION BY PHONE TO
DATE 8/24/15 CORRECT corp. name/alt name
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) DOC EXAM smasm
2. Delaware 3. 474587327 (FEI number, if applicable)
(State or country under the law of which it is incorporated)
4. 6/24/15 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. None
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 100 Pine St, # 100, San Francisco, CA 94111
(Principal office address)
1225 SW 94 Ave., Miami, FL 33174
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Alcjandro Sintas
Office Address: 1225 SW 94 Ave,
Miami, Florida 33174
(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.

(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

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

A. DIRECTORS

Chairman: Jose Alfonso Murat Moreno

Address: 100 Pine St, # 100, San Francisco, CA 94111

Vice Chairman:

Address:

Director: Alejandro Sintas

Address: 1225 SW 94 Ave, Miami, FL 33174

Director: Raul Herrero

Address: 650 Valencia Ave, Coral Gables, FL 33134

B. OFFICERS

President: Alejandro Sintas

Address: 1225 SW 94 Ave, Miami, FL 33174

Vice President:

Address:

Secretary: Raul Herrero

Address: 650 Valencia Ave, Coral Gables, FL 33134

Treasurer: Raul Herrero

Address: 650 Valencia Ave, Coral Gables, FL 33134

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 11 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. Alejandro Sintas - PRESIDENT + CEO

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

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TALLAHASSEE, FLORIDA

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIFESENSED, INC." 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 SAID "LIFESENSED, INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5773564 8300

151202451

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2666900

DATE: 08-21-15