

Electronic Filing Menu Corporate Filing Menu

https://efile.sunbiz.org/scripts/efilcovr.exe

## 10/2/2015 11:15:05 AM From: To: 8506176383( 2/6 )

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: Qognify. Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Floride," "Certificate of Existence," or "Certificate of Good Standing" and obsek are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Moti Shabtai

	Nam	e of Person	
Qognify, in	c.		
	Firm	Company	
461 From R	oad, 3rd Floor		
	1	\ddress	
Paramuø,	NJ 07652		
	City/St.	ate and Zip code	
	Moti, Shabtai	@qognify.com	
·····	E-mail address: (to be u	sed for future annual report	notification)
r further information	n concorning this matter, ple	ase call:	
loti Shebtai	Ar(201	549-1893	
Noti Shabtai	on Ar ( 20:		one Nuraber
Noti Shebtal			ione Number
Name of Pors	on A	rea Code & Daytime Teleph	· · · ·
Name of Pors	on A URIER ADDRESS:	rea Code & Daytime Teleph MAILING A	DDRESS
Name of Pors STREET/CO Now Filing Se	on A URIER ADDRESS: ction	rea Code & Daytime Teleph MAILING A New Filing Sc	DDRESS:
Name of Pors STREET/CO Now Filing So Division of Co	on A URIER ADDRESS: ction upportions	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce	DDRESS: option orporations
Name of Pors STREET/CO Now Filing So Division of Co Clifton Buildir	on A URIER ADDRESS: ction upporations	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce P.O. Box 632	DDRESS: option orporations 7
Name of Pors STREET/CO Now Filing So Division of Co Clifton Buildir 2661 Executiv	on A URIER ADDRESS: ction protations ng e Center Circle	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce	DDRESS: option orporations 7
Name of Pors STREET/CO Now Filing So Division of Co Clifton Buildir	on A URIER ADDRESS: ction protations ng e Center Circle	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce P.O. Box 632	DDRESS: option orporations 7
Name of Pors STREET/CO Now Filing So Division of Co Clifton Buildir 2661 Exeoutiv Tallahassoc, F	on A URIER ADDRESS: ction importions ag e Center Circle L 32301	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce P.O. Box 632	DDRESS: option orporations 7
Name of Pors STREET/CO Now Filing So Division of Co Clifton Buildir 2661 Exeoutiv Tallahassoc, F	on A URIER ADDRESS: ction protations ng e Center Circle	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce P.O. Box 632	DDRESS: option orporations 7
Name of Pors STREET/CO Now Filing So Division of Co Clifton Buildir 2661 Exeoutiv Tallahassoc, F closed is a check for	on A URIER ADDRESS: ction importaions ag e Center Circle L 32301 r the following amount:	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce P.O. Box 632 Tallahassee, F	DDRESS: option proportions 7 L 32314
Name of Pors STREET/CO Now Filing So Division of Co Clifton Buildir 2661 Exeoutiv Tallahassoc, F	on A URIER ADDRESS: ction importions ag e Center Circle L 32301	rea Code & Daytime Teleph MAILING A New Filing Se Division of Ce P.O. Box 632	DDRESS: option orporations 7

FL019 - 06/19/2014 C T Filing Manager Online

1 Qognify, Inc.				
(Enter name of "Inc.," "Co.," "	corporation; must include "INCORPORATED Cons." "Inc." "Co." or "Corp.")	)," "COMPANY," "CORPORATION,"		
(If name unavai	lable in Florida, enter alternate corporate name	e adopted for the purpose of transacting business	is in Florida)	
2. Delaware	3	47-4758527		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)		
4. 07/28/2015	5	Porpetual		_
(Date of incorporation) (Duration: Year sorp, will sease to exist or "perpetual")				
5. Upon Qualifica	tion			
		in Florida, if prior to registration) 1502, F.S., to dotormine penalty liability)		
, 461 From Road,	3rd Floor, Parsmus, NJ 07652			
	(Principal office add	dreau)		5 OC
samo				- <u>_</u>
	(Current mailing ad	dress)		N
				-
. Name and stro	et address of Plorida registered agent: (P.	O. Box <u>NOT</u> acceptable)	· **** [****	ИН 8:

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 heraby 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.

Copporation System - **8**1 (Registered agent's signature)

10. Attached is a cortificate 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.

PL019 - 04/19/8014 C T Pulling Manager Online

## 10/2/2015 11:15:05 AM From: To: 8506176383( 4/6 )

1

co Chairman:	
co Chairman:	
Idress:	
dress:	
	·····
9dior:	
dress:	ें ज
OFFICERS	Corres Corres
sident: Mordechai Shabtai	
dress: 461 From Road, 3rd Ploor	
Paronius, NJ 07652	<u> </u>
e President: Josse Peldman	DE N
iress: 1 Marina Park Drive	
Boston, MA 02110	
retary: Mordechai Shebtai	• • • • • • • • • • • • • • • • • • •
ress: 461 From Roud, 3rd Floor, Paramus, NJ 07652	
isurer: Mordechai Shabtai	
ress: 461 From Road, 3rd Floor, Paramus, NJ 07652	<u></u>
TE: If necessary, you may attach an addendum to the application listing additional officers and	d/or directors.
Signature of Director or Officer	

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

FL019 - 06/19/2014 C T Filing Munder Online

Attachment to Florida Officers & Directors

Full Name: t Officer/Director: Officer's Title: Director's Title: Business Address; City: State: ZIP Code: 2 Full Name: Officer/Director: Officer's Title: Director's Title: Business Address: City: State: ZIP Code: 3 Full Name: Officer/Director; Officer's Title: Director's Title: Business Address: City: State: ZIP Code:

Mordechal Shabtai Officer, Director President, Secretary, Treasurer Director 461 From Road, 3rd Floor Paramus NJ 07652 Shimon Levy Director

Director 461 From Road, 3rd Floor Paramus NJ 07652 Adam Markin Director

Director 461 From Road, 3rd Floor Paramus NJ 07652



10/2/2015 11:15:05 AM From: To: 8506176383( 6/6 )

• • •\_



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "QOGNIFY, 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.





Jaffray W. Bulliok, Secontary of Bister

Authentication: 10158700 Date: 09-30-15

5792730 8300

SR# 20150327341 You may verify this certificate online at corp.delaware.gov/authver.shtml