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(Requestor's Name)

(Address)

(Address)

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TALLAHASSEE, FLORIDA

NOV - 9 2015
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: iQuate, 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:

Michael Conti, CPA

Name of Person

Michael Conti, CPA, P.C.

Firm/Company

87 Wendell Street, Suite 200

Address

Boston, MA 02110

City/State and Zip code

mike@michaelconticpa.com

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

For further information concerning this matter, please call:

Michael Conti

617 695-0303
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. iQuate Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

2. Delaware 3. 45-3610000
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. October 6, 2011 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. January 2015
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1426 Phillmore Street, Suite #202, San Francisco, CA 94123
(Principal office address)

(Current mailing address, if different)

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

Name: Sean Mee
Office Address: 1650 N. Mills Ave #221
Orlando, Florida 32803
(City) (Zip code)

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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.

Sean Mee
(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: Patrick McNally
1426 Fillmore Street, suite 202
Address: San Francisco, CA 94115

Vice Chairman:
Address:

Director: John Shiel
1426 Fillmore Street, suite 202
Address: San Francisco, CA 94115

Director: John Maybury
1426 Fillmore Street, suite 202
Address: San Francisco, CA 94115

B. OFFICERS

President: Douglas Ehrenreich
1426 Fillmore Street, suite 202
Address: San Francisco, CA 94115

Vice President:
Address:

Secretary: Douglas Ehrenreich
1426 Fillmore Street, suite 202 San Francisco, CA 94115
Address:

Treasurer: Douglas Ehrenreich
1426 Fillmore Street, suite 202 San Francisco, CA 94115
Address:

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

12. Douglas Ehrenreich
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. Douglas Ehrenreich, President
(Typed or printed name and capacity of person signing application)

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IQUATE 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-NINTH DAY OF OCTOBER, 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 SAID "IQUATE INC." WAS INCORPORATED ON THE SIXTH DAY OF OCTOBER, A.D. 2011.

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

FILED
15 NOV - 6 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Jeffrey W. Bullock, Secretary of State

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SR# 20150690068

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

Authentication: 10321253

Date: 10-29-15