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(((H16000053415 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone Fax Number : (850)205-8842 : (850)878-5368

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

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION Kenandy, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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Corporate Filing Menu

Help

COVER LETTER

-	tration Section ion of Corporations			
SUBJECT:	KENANDY, INC.			
Name of corporation - must include suffix				
Dear Sir or M	adam:		,	
"Certificate of	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to to	of Good Standin	ig" and check are su	
Please return a	all correspondence concerni	ing this matter to	the following:	
Mark Saliman				
		Name of Per	son	
KENANDY, II	VC.			
		Firm/Compa	ny	
303 Twin Dolp	hin Dr Ste 500			
		Address		
Redwood City,	CA 94065-1448			
		City/State and	Zip code	
mark@kenandy				•
	E-mail address	: (to be used for	future annual report	notification)
For further inf	formation concerning this m	atter, please call	:	
Mark Saliman		nt (650	468-2957	
Name	of Person	ut (650 Area Code	Daytime Telep	phone Number
Regist Divisio Cliftor 2661 E Tallah	ET/COURIER ADDRESS ration Section on of Corporations 1 Building Executive Center Circle assee, FL 32301 theck for the following amo		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
570.00 Fili	· ·	Fee & 🗆 \$	78.75 Filing Fee & ertified 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.

	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"				
"Inc.," "Co.," "(Corp," "Inc," "Co," or "Corp.")				
Trame upouci	able in Florida, enter alternate corp		A		
Delaware					
	ry under the law of which it is inco	3	(EEI number is	Fannlicable)	
06/15/2011	y wilder and the village of mach				
(Date	e of incorporation)	5	Date of duration, if of	her than perpetual)	
•	• ,	`		,	
		d business in Florida, if			
	(SEE SECTIONS 607.15		determine penalty lia	bility)	
3 Twin Dolphi	n Dr Ste 500, Redwood, CA 9406	5-1448			
		(Principal office ac	ldress)		
 	(C	urrent mailing address,	if different)		
	(C	urrent mailing address,	if different)		
lame and stre	(C et address of Florida registered			440	
Name:	et address of Florida registered			A ₁	
Name:	C T Corporation System 1200 South Pine Island Road			16 H 78 C A	
Name:	C T Corporation System 1200 South Pine Island Road Plantation	agent: (P.O. Box NO	OT acceptable)	16 HAR SECTION	
Name:	C T Corporation System 1200 South Pine Island Road	agent: (P.O. Box NO	OT acceptable)	TO HAR -	
Name: ce Address:	C T Corporation System 1200 South Pine Island Road Plantation	agent: (P.O. Box NO	OT acceptable)	TO HAR - I ALL MASSING OF	
Name: ce Address: tegistered aging been nam	C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: seed as registered agent and to a	agent: (P.O. Box No	or acceptable) rida 33324 (Zip code) ress for the above sta		
Name: ce Address: degistered aging been name	et address of Florida registered C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: and as registered agent and to all application, I hereby accept the	agent: (P.O. Box No	or acceptable) rida 33324 (Zip code) ress for the above stagistered agent and a	igree to act in this capaci	
Name: ce Address: degistered aging been nam ynated in this	et address of Florida registered C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: led as registered agent and to a application, I hereby accept the omply with the provisions of all	agent: (P.O. Box No.	or acceptable) rida 33324 (Zip code) ress for the above stagistered agent and a	igree to act in this capaci plete performance of my	
Name: ce Address: Registered ag ing been nam gnated in this her agree to c	C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: led as registered agent and to a application, I hereby accept the omply with the provisions of alfamiliar with and accept the ob	agent: (P.O. Box No.	or acceptable) rida 33324 (Zip code) ress for the above stagistered agent and a	igree to act in this capaci plete performance of my	
Name: ce Address: Registered aging been nam gnated in this her agree to c	C T Corporation System 1200 South Pine Island Road Plantation (City) ent's acceptance: led as registered agent and to a application, I hereby accept the omply with the provisions of alfamiliar with and accept the ob	agent: (P.O. Box No	or acceptable) rida 33324 (Zip code) ress for the above stagistered agent and a	igree to act in this capaci plete performance of my	

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.

•					
3/1/2010	5 2:18:02 PM From: To: 8506176383(4/5)				
11. Nam	nes and business addresses of officers and/or directors:	·			
A. DIR	ECTORS				
Chairman	Sandra Kurtzig				
Address:	303 Twin Dolphin Dr Ste 500, Redwood, CA 94065-1448				
Vice Chai	Chris Schaepe				
Address:	303 Twin Dolphin Dr Ste 500, Redwood, CA 94065-1448				
Director:	Larry Sonsini				
Address:	303 Twin Dolphin Dr Ste 500, Redwood, CA 94065-1448				
Director:	Raymond Lane				
Address:	303 Twin Dulphin Dr Ste 500 Redwood CA 94065-1448				
B. OFFI	CERS				
President:	Chuck Berger				
-	303 Twin Dolphin Dr Ste 500, Redwood, CA 94065-1448	16 SEC			
ı					
Vice Presi	dent:	7			
Address:					
		S: I			
Secretary:		200			
Address:					
Treasurer:	Stephen Cumming				
	303 Twin Dolphin Dr Ste 500, Redwood, CA 94065-1448				

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

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

13 Stephen Cumming, CFO

a third degree felony as provided for in s.817.155, F.S.

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "KENANDY, 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-FOURTH DAY OF FEBRUARY, A.D. 2016.

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.

Authentication: 201882294

Date: 02-24-16

4996879 8300

SR# 20161114742

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