Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORFORATION SYSTEM

Account Number : FCACO0000023

: (850)205-8942

Fax Number

: (850)878-5368

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

Email Address:

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FOREIGN PROFIT/NONPROFIT CORPORATION

MedGenome Inc.

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

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Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

COTER	DETTER
TO: Registration Section Division of Corporations	
MEDGENOME, INC.	
SUBJECT:	
Name of corporat	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation to "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	tanding" and check are submitted to register the
Please return all correspondence concerning this mar DONNA HONGO	iter to the following:
Name	of Person
MEDGENOME, INC.	
Firm/C	ompany
348 HATCH DRIVE	
Ad	dress
FOSTER CITY, CA 94404	
City/State	and Zip code
AMITC@MEDGENOME.COM	·
E-mail address: (to be use	d for future annual report notification)
For firstly information approximately matter place	a anth
For further information concerning this matter, pleas	e can:
DONNA HONGO 650	539-2458
Name of Person Area C	ode Daytime Telephone Number
•	
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahussec, FL 32314
Enclosed is a check for the following amount:	
578.75 Filing Foe & Certificate of Status	1 \$78.75 Filing Fee &

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. MEDGENOME, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) DELAWARE 463020289 (FEI number, if applicable) (State or country under the law of which it is incorporated) PERPETUAL (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.150) & 607.1502, F.S., to determine penalty liability) 348 HATCH DRIVE, FOSTER CITY, CA 94404 (Principal office address) 348 HATCH DRIVE, POSTER CITY, CA 94404 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT accoptable) CT Corporation System Name: 1200 South Pine Island Road Office Address: Plantation, FL 33324 (City) 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 us 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 By: (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.

	ECTORS Sam Santhosh			
	5510, Calico Lane, Pleasanton, CA 94566			
Directo	Abnuy Pandey			
Vice Chai	B1601, Bellissimo, NM Joshi marg, Mahalaxmi, Mumbai 400011			
Director:	Mahosh Pratapaoni			********
	27, Windmills of Your Mind, Whitefield Road, EPIP Zone, Behind SAP Labs, Bangalore, Karnatal	a-560066		
Director:	Dhiraj Rajaram .			
	"Villa 11 and 12, Windmills of Your Mind, EPIP Zone, Whitefield Bangalore KA 560066"			
	SAM SANTHOSH 5510, Calico Lane, Pleasanton, CA 94566		===	
Vice Presi	dent;			
Address:		<u> </u>	V.	
Secretary:			- 10; - 13; - 13;	
Address:	Surajit Chakcabarity	100 m	<u> </u>	.
Treasurer:				
Address:	of necessary, you may attach an addendum to the application listing additional officers and	l/or direc	lors.	
The offic	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the data has one of that he or she is aware that false information submitted in a document to the Departme gree felony as provided for in s.817.155, F.S.	nc facts st	ated her e consti	ein Iutos

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "MEDGENOME 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 EIGHTEENTH DAY OF MARCH, 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.

5352877 8300

SR# 20161747232

Authentication: 202010004

Date: 03-18-16