

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.**

((H16000141111 3)))



H160001411113ABCQ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (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  
LIQUID LABS INC.**

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

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

16 JUN - 9 AM 11:20

FILED

2016 JUN - 9 AM 10:10

Electronic Filing Menu

Corporate Filing Menu

Help

JUN 10 2016

Y SULKER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Liquid Labs 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:

Debbie Cokbilen

---

Name of Person

National Registered Agents, Inc.

---

Firm/Company

900 Merchants Concourse, Suite 405

---

Address

Westbury, NY 11590

---

City/State and Zip code

saron@gigater.com

---

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

For further information concerning this matter, please call:

Debbie Cokbilen

at 888 579-0286

---

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. Liquid Labs 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)

2. Delaware

3. \_\_\_\_\_ (State or country under the law of which it is incorporated) (PEI number, if applicable)

4. 7/17/2013

5. Perpetual

(Date of incorporation)

(Date of duration, if other than perpetual)

6. \_\_\_\_\_

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

7. 500 3rd Street, Suite 245 San Francisco CA 94107

(Principal office address)

Name:

C T Corporation System

Office Address:

1200 South Pine Island Road

Plantation, FL

, Florida 33324

(City)

(Zip code)

16 JUN - 9 AM 11:20  
ALL  
PENITENTIARY  
DEPARTMENT  
OF  
FLORIDA  
TALL  
HASSEE, FLORIDA

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

Name:

C T Corporation System

1200 South Pine Island Road

Plantation, FL

, Florida 33324

(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.*

C T Corporation System

By: \_\_\_\_\_

*[Signature]*  
(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.

6/9/2016 9:24:15 AM From: To: 8506176383 ( 4/5 )

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

**A. DIRECTORS**

Chairman: Roger Dickey

Address: 500 3rd Street, Suite 245, San Francisco, CA 94107

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Roger Dickey

Address: 500 3rd Street, Suite 245, San Francisco, CA 94107

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Aaron Cheung

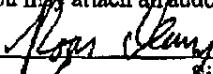
Address: 500 3rd Street, Suite 245, San Francisco, CA 94107

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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. \_\_\_\_\_

Roger Dickey

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

16 JUN - 9 AM 11:20  
RECEIVED  
U.S. DEPARTMENT OF STATE  
STATE - 2015  
ECL

# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIQUID LABS 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 NINTH DAY OF JUNE, A.D. 2016.

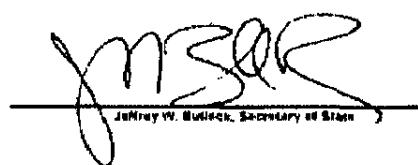
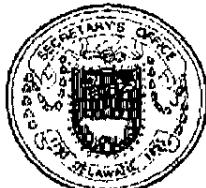
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

5368740 8300

SR# 20164375568

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



A handwritten signature of Jeffrey W. Bullock in black ink. Below the signature, the text "Jeffrey W. Bullock, Secretary of State" is printed in a smaller font.

Authentication: 202459158

Date: 06-09-16