

F1800003932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECURITY OF STATE
TALLAHASSEE, FLORIDA

AUG 25 2018
S. YOUNG

• ATTACHMENT

APPLICATION FOR REGISTRATION OF A FOREIGN FOR- PROFIT CORPORATION

DREMIO CORPORATION

ADDITIONAL LIST OF DIRECTORS:

NAME: TOMER SHIRAN

ADDRESS: 883 NORTH SHORELINE BLVD STE C100, MOUNTAIN VIEW, CA USA 94043

NAME: TOMASZ TUNGUZ

ADDRESS: 883 NORTH SHORELINE BLVD STE C100, MOUNTAIN VIEW, CA USA 94043

NAME: JACQUES NADEAU

ADDRESS: 883 NORTH SHORELINE BLVD STE C100, MOUNTAIN VIEW, CA USA 94043

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DREMIO CORPORATION

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:

ANGELINE TAN

Name of Person
SAGENT MANAGEMENT

Firm/Company
691 S. MILPITAS BLVD., SUITE 212

Address
MILPITAS, CA 95035

City/State and Zip code
SAGENTOPERATIONS@SAGENTMANAGEMENT.COM

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

For further information concerning this matter, please call:

Name of Person at (_____) _____
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

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18 AUG 20 PM 4:56
TALLAHASSEE, FLORIDA

**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.

DREMIO CORPORATION

1. _____
(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. 47-4311632
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/09/2015 5. 07/30/2018
(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. 883 NORTH SHORELINE BLVD STE C100, MOUNTAIN VIEW, CA 94043
(Principal office address)
691 S. MILPITAS BLVD., SUITE 212, MILPITAS, CA 95035
(Current mailing address, if different)

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

Name: INCORPORATING SERVICES, LTD.

Office Address: 1540 GLENWAY DR

TALLAHASSEE, Florida 32301
(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.

Melissa Ego

(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: RAMA SEKHAR

Address: 883 NORTH SHORELINE BLVD STE C100, MOUNTAIN VIEW, CA 94043

Director: BARRY EGGERS

Address: 883 NORTH SHORELINE BLVD STE C100, MOUNTAIN VIEW, CA 94043

B. OFFICERS

President: TOMER SHIRAN

Address: 883 NORTH SHORELINE BLVD STE C100, MOUNTAIN VIEW, CA 94043

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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. TOMER SHIRAN (CEO)
(Typed or printed name and capacity of person signing application)

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NOTARY STATE
FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "DREMIO CORPORATION" 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 AUGUST, A.D. 2018.

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18 AUG 20 PM 4:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



5763388 8300

SR# 20186103737

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203224699

Date: 08-09-18