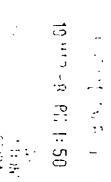
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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aluly or

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

75.

ACC	COUNT NO.	: 12000000	0195		
Ŧ	REFERENCE	: 676532	71854395	2919	
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CC	ST LIMIT	: \$70.00	Service Servic	- B - B	9 9 9 1
ORDER DATE : March 7 ORDER TIME : 12:18 E ORDER NO. : 676532-	РМ			· সূ	-;-
CUSTOMER NO: 7185					
	FOREIGN FII	LINGS			
NAME: CURA	TOR SOLUTIO	ONS, INC.			
XXXX QUALIFICATION	(TYPE: <u>CO</u>)				
PLEASE RETURN THE FOL	LOWING AS E	PROOF OF FI	LING:		
CERTIFIED COF XX PLAIN STAMPED CERTIFICATE C	COPY	NDING			

EXAMINER:

CONTACT PERSON: Roxanne Turner -- EXT# 62969

COVER LETTER

	Registration Se Division of Cor						
SUBJEC	Curator S	olutions, Inc.					
SOBJEC	~1·	Name	of corporat	ion - mu	st include suffix		
Dear Sir o	or Madam:						
"Certifica above ref	nte of Existence erenced foreig		e of Good S transact bus	Standing siness in	" and check are sub Florida.	et Business in Florid omitted to register the	
			Name	of Perso	on		
Cooley LI	LP					[- J	
11951 Fre	edom Drive, 16	th Floor	Firm/C	ompany		,	٠ د
•			Ac	ldress			
Reston, V	A 20190-5640						
			City/Stat	e and Zi	p code		
apohle@c	uratorsolutions.						
		E-mail addres	ss: (to be use	ed for fu	ture annual report i	notification)	
For furthe	er information	concerning this i	natter, pleas	se call:			
Linh Su			703	4	56-8036		
	Name of Perso	<u> </u>	at (Area C) Code	Daytime Telep	hone Number	
R D C 20	TREET/COU legistration Sec Division of Cor difton Building 661 Executive fallahassee, FL	porations 3 Center Circle	SS:		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee. F	ection prporations	
Enclosed	is a check for	the following am	ount:				
\$70.00) Filing Fee	S78.75 Filir Certificate			3.75 Filing Fee & tified Copy	S87.50 Filing F Certificate of S	Status &

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.	Curator Solution	ns, Inc.		
	(Enter name of co	orporation; must include "INCORPORATED. orp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORAT	ION."
	(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transa-	cting business in Florida)
2.	Delaware	3	·	
	(State or country	y under the law of which it is incorporated)	(FEI number, i	fapplicable)
4.	07/16/2014	5.	Perpetual	
	(Date	of incorporation)	(Date of duration, if ot	her than perpetual)
6.				
		(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registration)	EULINE PO
	13461 Sunrise Va	alley Drive, Herndon, VA 20171	1302; F.S., to determine penalty ha	- 65
7.			ipal office address)	
	13461 Sunrise Va	alley Drive, Herndon, VA 20171	par office address)	555
		(Current maili	ing address, if different)	2 0
8.	Name and stree	et address of Florida registered agent: (P. Corporation Service Company	O. Box <u>NOT</u> acceptable)	6. 0 J
Of	ffice Address:	1201 Hays Street		
		Tallahassee	32301 , Florida	
		(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.

Corporation Service Company

By:

(Registered agent's signature)

Roxanne Turner

Asst. Vice President

0. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to he Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction nder the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS See Attachment Chairman: Address: __ Vice Chairman: Address: Director: Director: ___ Ģ. **B. OFFICERS** Sec Attachment President: Vice President: Address: ____ Secretary: _____ Address: __ Treasurer: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Jacob Schaufeld, Chief Executive Officer

13.

<u>Attachment to</u> <u>Application by Foreign Corporation for Authorization to Transact Business in Florida</u>

The below officers and directors have the following business address:

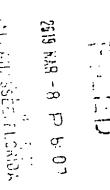
c/o Curator Solutions, Inc. 13461 Sunrise Valley Drive Herndon, VA 20171

DIRECTORS:

Jacob Schaufeld Andrew Pohle Fred Schaufeld

OFFICERS:

Chairman	Jacob Schaufeld
Chief Executive Officer	Jacob Schaufeld
President	Jacob Schaufeld
Secretary	Andrew Pohle
Treasurer	Andrew Pohle



Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CURATOR SOLUTIONS, 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 EIGHTH DAY OF MARCH, A.D. 2019.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CURATOR

SOLUTIONS, INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF JULY,

A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE

BEEN PAID TO DATE.

Authentication: 202401235

Date: 03-08-19

5569786 8300 SR# 20191843790

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