

3/8/2019

**A900000112B**

Florida Department of State  
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.

(((H19000079343 3)))



H19000079343ABC3

**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 : (614)280-3338  
Fax Number : (954)208-0845

**\*\*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****Vertiflex, Inc.****RECEIVED**

MAR 08 2019

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$878.75

Electronic Filing Menu

Corporate Filing Menu

Help

3/11/19 DS

## 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. Vertiflex, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 20-1616396  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/31/2004 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. 01/15/2017  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, 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: Kimberly Laughrey Kimberly Laughrey, Assistant Secretary  
(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: Earl R. Fender

Address: c/o Vertiflex, Inc.

2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

Director: Ray Baker

Address: c/o Vertiflex, Inc.

2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

**B. OFFICERS**

President: Earl R. Fender

Address: c/o Vertiflex, Inc.

2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

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

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

Secretary: J. Casey McGlynn

Address: c/o Vertiflex, Inc., 2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

Treasurer: Jeff Swiecki, CFO

Address: c/o Vertiflex, Inc., 2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

**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. Jeff Swiecki, CFO

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

A. Directors

Ross Jaffe  
c/o Vertiflex, Inc.  
2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

Richard Mott  
c/o Vertiflex, Inc.  
2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

Alexander Schmitz  
c/o Vertiflex, Inc.  
2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

Kathy Tune  
c/o Vertiflex, Inc.  
2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

Michael Wasserman  
c/o Vertiflex, Inc.  
2714 Loker Ave. West, Suite 100, Carlsbad, CA 92010

2019-03-08 12:00:48 CST  
919 418-1010

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "VERTIFLEX, 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 SEVENTH 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 FRANCHISE TAXES HAVE  
BEEN PAID TO DATE.



3846792 8300

SR# 20191827322

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://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 in a small font.

Authentication: 202395936

Date: 03-07-19