

F19000001839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

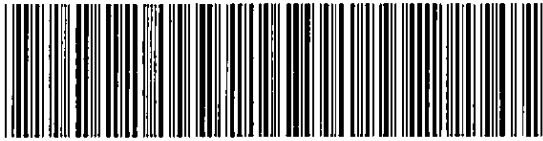
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800327790868

04/15/19--01002--001 \*\*70.00

FILED  
2019 APR 12 PM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
19 APR 12 2:15:08

4/15/19 YS

**CORPORATE  
ACCESS,  
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 Fax (850) 222-1566

**WALK IN**

PICK UP: 04/12/2019

CERTIFIED COPY

PHOTOCOPY

CUS

FILING

FOREIGN

2019 APR 12 P 10:10A  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

1. ARMIS, INC.

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL  
INSTRUCTIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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. Armis, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Delaware (State or country under the law of which it is incorporated)
3. 30-0953950 (FEI number, if applicable)
4. 04/20/2016 (Date of incorporation)
5. 4/1/2019 (Date of duration, if other than perpetual)
6. 325 Lytton Av. Suite 150, Palo Alto, CA 94301 (Date first transacted business in Florida, if prior to registration)
7. 325 Lytton Av. Suite 150, Palo Alto, CA 94301 (Principal office address)
(Current mailing address, if different)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2019 APR 12 PM 10:00

FILED

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

Name: Registered Agent Solutions, Inc.
Office Address: 155 Office Plaza Dr., Suite A
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.

Adam Saldana, Asst. 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: Evgeny Dibrov

Address: 325 Lytton Ave., Suite 150

Palo Alto, CA 94301

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

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

FILED  
2019 APR 12 PM 04  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**B. OFFICERS**

President: Evgeny Dibrov

Address: 325 Lytton Ave., Suite 150, Palo Alto, CA 94301

\_\_\_\_\_

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

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

Secretary: Evgeny Dibrov

Address: 325 Lytton Ave., Suite 150, Palo Alto, CA 94301

Treasurer: Ofer Katz

Address: 325 Lytton Ave., Suite 150, Palo Alto, CA 94301

**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.

Evgeny Dibrov, Officer

13. \_\_\_\_\_

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

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ARMIS, 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 ELEVENTH DAY OF APRIL, 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 "ARMIS, INC." WAS INCORPORATED ON THE TWENTIETH DAY OF APRIL, A.D. 2016.

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

FILED  
2019 APR 12 P 03:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State

6021196 8300

SR# 20192773285

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

Authentication: 202628911

Date: 04-11-19