FIGURE 308

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 931869

AUTHORIZATION :

COST LIMIT : \$ 70~00

ORDER DATE: September 24, 2019

ORDER TIME : 3:44 PM

ORDER NO. : 931869-005

CUSTOMER NO: 8278279

FOREIGN FILINGS

NAME: LAMBDA, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER:

COVER LETTER

TO: Registration Section

Division of Corporations LAMBDA, INC.						
SUBJECT:						
Name	of corpora	tion - mu	st include suffix			
Dear Sir or Madam:				7019 S		
The enclosed "Application by Foreign C "Certificate of Existence," or "Certifica above referenced foreign corporation to	te of Good S	Standing	" and check are sub	ct Business in Florida omitted for register the	三	
Please return all correspondence concer Amneet Bhurji	ning this ma	itter to th	e following:	H 4: 43 FEORICE FELORICE	D	
Lambda School	Name	of Perso	on	7		
548 Market St. #69148	Firm/C	Company				
San Francisco, CA 94104-5401	A	ddress				
accounting@lambdaschool.com	City/Sta	te and Zi	p code			
E-mail addre	ss: (to be us	ed for fu	ture annual report i	notification)		
For further information concerning this	matter, plea	se call:				
Amneet Bhurji	512	512 670-8078				
	_ at (
Name of Person	Area (Code	Daytime Telep	hone Number		
STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	SS:		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7		
Enclosed is a check for the following ar	nount:					
☐ \$70.00 Filing Fee ☐ \$78.75 Fili Certificate			3.75 Filing Fee & tified Copy	S87.50 Filing F Certificate of S Certified Copy	Status &	

1.

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. LAMBDA, INC. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp,") LAMBDA SCHOOL, INC. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting businessim Florida) 82-1747820 2. (State or country under the law of which it is incorporated) May 17th 2017 (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 250 Montgomery Street, 16th Floor, San Francisco, CA 94104 (Principal office address) 548 Market Street #69148, San Francisco, CA 94104 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company

9. Registered agent's acceptance:

1201 Hays Street

(City)

Tallahassee

Name:

Office Address:

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.

, Florida

(Zip code)

Corporation Service Company

By:

(Registered agent's signature)

Roxanne Turner

Asst. Vice President

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 Austen Allred Chairman: 250 Montgomery Street, 16th Floor Address: San Francisco, CA 94104 Vice Chairman: Address: Samuel Nelson 77 Director: 2701 N Thanksgiving Way, Ste 100 Address: Lehi. UT 84043 \Box Address: **B. OFFICERS** Austen Alfred J President: 250 Montgomery Street, 16th Floor Address: San Francisco, CA 94104 Vice President: 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. Austen Alfred, ČEO 13. _____

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

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LAMBDA 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 TWENTY-FOURTH DAY OF SEPTEMBER; 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 "LAMBDA INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF MAY, A.D. 2017.

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

Authentication: 203655785

Date: 09-24-19