## F1900000518

(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:						





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2019 NOV 15 AH 10: 43

NOV 18 2019 M. SOLOMON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 051353 8051940

AUTHORIZATION :

COST LIMIT : \$ (7/0).00

ORDER DATE: November 14, 2019

ORDER TIME : 10:29 AM

ORDER NO. : 051353-015

CUSTOMER NO: 8051940

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## FOREIGN FILINGS

NAME: GARUDA LABS, 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					
SUBJ	GARUDA LABS, INC.					
SUDJ		poration -	must include suffix	_		
Dear S	Sir or Madam:					
"Certi	iclosed "Application by Foreign Corpora ficate of Existence," or "Certificate of Go referenced foreign corporation to transac	ood Stand	ing" and check are sub			•
Please	return all correspondence concerning th	is matter t	o the following:			
Zaldy	Doroliat					
	N	lame of Po	erson		1.	281 <del>5</del>
GARI	JDA LABS, INC.					35 
••	<del></del>	rni/Comp	any	<u>-</u>		
39 STI	LLMAN STREET					<i>U</i> 1
		Addres	;		- 40	
SAN F	RANCISCO, CA 94107				22	<u>ب</u>
	City	//State and	Zip code			<u> </u>
accoun	ting@instawork.com					
	E-mail address: (to b	ne used fo	future annual report	notification)		
For fu	ther information concerning this matter,	please ca	l:			
Zaldy I		08	455-2481			
	Name of Person A	rea Code	Daytime Telep	hone Number	_	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		
Enclos	ed is a check for the following amount:					
<b>□</b> \$70	0.00 Filing Fee S78.75 Filing Fee Certificate of State		\$78.75 Filing Fee & Certified Copy	\$87.50 Fili Certificate Certified C	of Sta	

## 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. GARUDA LAI				
(Enter name of c	corporation; must include "INCORPORATED," "Corp," "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION,"		
	able in Florida, enter alternate corporate name add		iness in Florida)	
Delaware 2.	3.	7-4250174		
(State or count) 06/08/2015		(FEI number. if applicable)		
(Date	5	(Date of duration, if other than p	perpetual)	
12/01/2019				
0.	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	lorida, if prior to registration) 2, F.S., to determine penalty liability)		
39 STILLMAN S	STREET, SAN FRANCISCO, CA 94107			
T	STREET, SAN FRANCISCO, CA 94107 (Principal	office address)	2918 KOY 1	
	(Current mailing	address, if different)		# 5 4 #************************************
8. Name and street	et address of Florida registered agent: (P.O.)	Box NOT acceptable)		, i
Name:	Corporation Service Company	<u> </u>	AH IO: 43	`~
Office Address:	1201 Hays Street			
Office Address.	Tallahassee	— 32301 . Florida		
	(City)	(Zip code)		
Having been nam designated in this further agree to c	ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointme comply with the provisions of all statutes rela familiar with and accept the obligations of n	nt as registered agent and agree to ative to the proper and complete pe	act in this capaci	ity. I
C	Corporation Service Company			
<u>B</u>	y:	IVUV	Harry B. D	avis
	(Registered age	ent's signature)	-Asst. Vice Pro	≋sident

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 Bill Gurley Chairman: Director: Address: 988 Market St., San Francisco, CA 94102 Vice Chairman: Director: Nabeel Hyatt Address: 368 Clementina St., San Francisco, CA 94103 Director: Geoff Donaker Address: 300 Hamilton Ave. Ste 400, Palo Alto, CA 94301 Director: **B. OFFICERS** Sumir Meghani President: 39 STILLMAN STREET Address: SAN FRANCISCO, CA 94107 Vice President: Address: Sumir Meghani Secretary: 39 STILLMAN STREET, SAN FRANCISCO, CA 94107 Address: 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.

Sumir Meghani - President and Secretary



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

DELAWARE, DO HEREBY CERTIFY "GARUDA LABS, 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 FOURTEENTH DAY OF NOVEMBER, 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 "GARUDA LABS,

INC." WAS INCORPORATED ON THE EIGHTH DAY OF JUNE, A.D. 2015.

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

Authentication: 204006258

Date: 11-14-19