# F200005474

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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#### Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

#### **ORDER FORM**

TO\_\_ Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops mstops@incserv.com 850.656.7953

REQUEST_DATE 12/4/2020	PRIORITY Routine	OUR REF_# (Order_ID#) 874309
ORDER ENTITYCODELOGIC, INC.		
PLEASE PERFORM THE FOLLO CODELOGIC, INC. (FL)	WING SERVICES:	
File the attached foreign qualific	ation document	
NOTES:		
\$70.00 Authorized		~~ · · · ~ - ~ - ~

Please bill the above referenced account for this order.

**RETURN/FORWARDING INSTRUCTIONS:** 

ACCOUNT NUMBER: I20050000052

If you have any questions please contact me at 656-7956,

Email address for annual report reminders: Shawn.Linan@unisearch.com

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, December 4, 2020 Page 1 of 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.

CodeLogic, Inc.					
	orporation: must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	." "COMPANY," "CORPORATION,"			
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busi	ness in Florida		
Delaware 2.	3				
2. (State or country under the law of which it is incorporated)			_		
4. 11/19/2020	5	(Date of duration, if other than pe			
(Date of incorporation)		(Date of duration, if other than pe	erpetual)		
6.			₹5 ·		
7. 950 Tower Lane, Suite 2100, Foster City, California 94404 (Principal office		fice street address)			
	(Current maili	ng address, if different)			
8. Name and <u>stree</u> Name:	et address of Florida registered agent: (P. Corporation Service Company	O. Box <u>NOT</u> acceptable)			
Office Address:	1201 Hays Street				
	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.

Lynn M. CannaLongo Lynn M. CanneLongo, AVP

(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.

A. DIRECTORS					
□Chairman	Name: Rahul Gandhi	□Chairman	Name: Greg Wunderle		
□ Vice Chairman	Address: 950 Tower Lane, Ste 2100	□Vice Chairman	Address: 950 Tower Lane, Ste 2100		
Director	Foster City, CA 94404	Director	Foster City, CA 94404		
□President		President			
□Vice President	Rahul Gandhi, Chief Financial Officer	□Vice President			
☐ Secretary	□Treasurer	■ Secretary	□Treasurer		
Other CFO	Other	□Other CEO	Other		
<b>■</b> Chairman	Name: Robert Clifford	□Chairman	Name:		
□Vice Chairman	Address: 950 Tower Lane, Ste 2100	□Vice Chairman	950 Tower Lane, Ste 2100		
Director	Foster City, CA 94404	■ Director	Address: 950 Tower Lane, Ste 2100 Foster City, CA 94404		
□President		□President	()		
□ Vice President		□Vice President			
☐ Secretary	C) Treasurer	□Secretary	☐Treasurer		
Other	Other	□Other	Other		
□ Chairman	Name:	□Chairman	Name: Soumik Sarkar		
□Vice Chairman	Address: 950 Tower Lane, Ste 2100	□Vice Chairman	050 Tower Land St. 2100		
Director	Foster City, CA 94404	Director	Address:		
□President		□President	Foster City, CA 94404		
□Vice President		□Vice President			
☐Secretary	□Treasurer	Secretary	☐Treasurer		
Other	Other	Other CTO	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  Signature of Director or Officer					
The officer or direct she is aware that fall	tor signing this document (and who is listed in num se information submitted in a document to the Der	nber 11 above) affirms tha	t the facts stated herein are true and that he or		

s.817.155, F.S.

#### CODELOGIC, INC.

#### **ADDITIONAL OFFICERS**

Edwin Gnichtel

Chief Software Architect

950 Tower Lane, Suite 2100 Foster City, CA 94404

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CODELOGIC, 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 THIRTIETH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CODELOGIC, INC."

WAS INCORPORATED ON THE NINETEENTH DAY OF NOVEMBER, A.D. 2020.

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

Authentication: 204187194

Date: 11-30-20