# F2000005601

(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:					
W20000132543					

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# FLORIDA DEPARTMENT OF STATE Division of Corporations

November 18, 2020

CAMERON VERMETTE 125 SUMMER STREET 6TH FLOOR BOSTON, MA 02111

SUBJECT: KLAVIYO, INC. Ref. Number: W20000132543

We have received your document for KLAVIYO, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 020A00023247\( \sqrt{2} \)

www.sunbiz.org

#### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Klaviyo, Inc.			
	e of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificate above referenced foreign corporation to	te of Good Stand	ing" and check are submi	Business in Florida," itted to register the
Please return all correspondence concer-	ning this matter t	o the following:	
Cameron Vermette			
	Name of P	erson	
Klaviyo, Inc.			<u>~</u>
	Firm/Comp	any	
125 Summer Street, 6th Floor			PH 2: 37
	Addres	S	
Boston, MA 02111			
	City/State and	l Zip code	
cam.vermette@klaviyo.com			
E-mail addre	ss: (to be used fo	future annual report not	ification)
For further information concerning this	matter, please ca	l:	
Cameron Vermette	781 at (	328-1059	
Name of Person	Area Code	Daytime Telephor	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following an Please make check payable to: FLORIDA I  \$70.00 Filing Fee  \$78.75 Fili  Certificate	DEPARTMENT ( ng Fee &		<ul> <li>\$87.50 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> </ul>

# 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.

Klaviyo, Inc				
(Enter name of co	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"		
(If name unavaila	ble in Florida, enter alternate corporate name	adopted for the purpose of transacting bu	siness	in Florida
Delaware	3	46-0989964		
	under the law of which it is incorporated)	(FEI number, if applicable)		
09/14/2012	5	Perpetual		
	of incorporation)	(Date of duration, if other than perpetual)		
10/19/2020				
125 Summer Stree	(SEE SECTIONS 607.1501 & 607.1 et, 6th Floor, Boston, MA 02111	n Florida, if prior to registration) 502, F.S., to determine penalty liability) Fice street address)		2523 DED 16
(Current mailing address, if different)		ng address, if different)	-	<u> </u>
3. Name and <u>stree</u> Name:	t address of Florida registered agent: (P. CF Corporation	O. Box <u>NOT</u> acceptable)		2: 37
Office Address:	1200 South Pine Island Road			
	Plantation (City)	. Florida 33324 (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.

Jan M. H.J.

(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:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address: 125 Summer Street			
Director	6th Floor	Director	6th Floor			
<b>■</b> President	Boston, MA 02111	□President	Boston, MA 02111			
□Vice President		□Vice President				
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	Other	□Other	□Other			
□Chairman	Jon Karlen	□Chairman	Name: Michael Medici			
□Vice Chairman	Address:	□Vice Chairman				
Director	6th Floor	■Director	6th Floor			
□President	Boston, MA 02111	□President	Boston, MA 02111			
□Vice President		□Vice President	- 5			
☐ Secretary	□Treasurer	□ Secretary	□Treasurer ??			
□Other	Other	□Other				
□Chairman	Stephen Wietrecki	□Chairman	Name:			
	125 Summer Street		Address:			
□ Director	6th Floor	□Director	6th Floor			
□President	Boston, MA 02111	□President	Boston, MA 02111			
□Vice President		□Vice President				
■ Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	Other	■Other	ecretary 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.						
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 can she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.						

13. Cameron Vermette

2-20 DEC 16 PH 2.

Florida Department of State Registration Section, Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### RE: Addendum to Application by Foreign Corporation to Transact Business in Florida

Section 11(A) - Directors/Officers

Vice President: Brian Fisher, 125 Summer Street, 6<sup>th</sup> Floor, Boston MA 02111

Treasurer: Benjamin Cook, 125 Summer Street, 6th Floor, Boston MA 02111



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

DELAWARE, DO HEREBY CERTIFY "KLAVIYO, 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 SECOND DAY OF NOVEMBER, A.D. 2020.

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.

Authentication: 203993339

Date: 11-02-20