

Division of Corporations

F2100005113

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003280363)))



H210003280363ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000050023
Phone : (614) 280-3338
Fax Number : (954) 208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

2021 SEP -2 PM 2:08

FOREIGN PROFIT/NONPROFIT CORPORATION
VISIBLERISK, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

2021 SEP -2 AM 11:26

STATE OF FLORIDA
TALLAHASSEE, FLORIDA5/31
9/3/21

Electronic Filing Menu

Corporate Filing Menu

Help

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. VisibleRisk, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DE 3. (State or country under the law of which it is incorporated) (FEI number, if applicable)

6/13/2019 4. 5. (Date of incorporation) (Date of duration, if other than perpetual)

6. (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 488 Madison Ave., Suite 1103, New York, NY 10022
(Principal office address)

(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

C T Corporation System

By: [Signature]
(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.

2021 SEP -2 PM 2:08
FILED

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: None

Address: _____

Vice Chairman: None

Address: _____

Director: Lluis PedragosaAddress: 488 Madison Ave., Suite 1103, New York, NY 10022Director: Simon HastilowAddress: 488 Madison Ave., Suite 1103, New York, NY 10022

B. OFFICERS

President: Derek VadalaAddress: 488 Madison Ave., Suite 1103, New York, NY 10022Vice President: Derek VadalaAddress: 488 Madison Ave., Suite 1103, New York, NY 10022Secretary: Johanna WerbachAddress: 488 Madison Ave., Suite 1103, New York, NY 10022Treasurer: Derek VadalaAddress: 488 Madison Ave., Suite 1103, New York, NY 10022

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Johanna L Werbach

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.

13. Johanna Werbach, Secretary

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

11. Names and business addresses of officers and/or directors:

DIRECTORS (Continued):

Director: Derek Vadala
Address: 488 Madison Ave., Suite 1103, New York, NY 10022

Director: Nadav Zafrir
Address: 488 Madison Ave., Suite 1103, New York, NY 10022

Director: David Platt
Address: 488 Madison Ave., Suite 1103, New York, NY 10022

2021 SEP -2 PM 2:08

Delaware


The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "VISIBLERISK, 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 EIGHTEENTH DAY OF AUGUST, A.D. 2021.
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.

2021 SEP -2 PM 2:08




Jeffrey W. Bullock, Secretary of State