

9/16/21, 4:30 PM

Division of Corporations

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Florida Department of State
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To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)200-3338
Fax Number : (954)200-0845

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

Incorta, Inc.

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

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TALLAHASSEE, FLORIDA

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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.*

Incorta, Inc.

1. _____
(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)
State of Delaware 46-4382878

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
12/20/2013 Perpetual

4. _____ 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
9/15/2021

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
2855 Campus Drive, Suite 300, San Mateo, CA 94403

7. _____
(Principal office address)
2855 Campus Drive, Suite 300, San Mateo, CA 94403

(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)

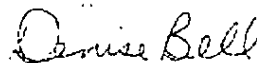
9. Registered agent's acceptance:

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: Denise Bell Asst. Secretary

(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.

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 TALLAHASSEE, FL

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

A. DIRECTORS

Osama Elkady

Chairman

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

Ron Wohl

Vice Chairman

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

Karim Faris

Director:

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

Ted Schlein

Director:

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

B. OFFICERS

Scott Jones

President

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

Karl Mayer

Vice President:

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

Mihail Georgiev

Secretary:

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

Mihail Georgiev

Treasurer:

2855 Campus Drive, Suite 300, San Mateo, CA 94403

Address:

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

DocuSigned by:

12. Mihail Georgiev
CO163C1D2E72445

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.

Mihail Georgiev, Treasurer and Controller

13.

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

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "INCORTA, 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 SIXTEENTH DAY OF SEPTEMBER, 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.



5453969 8300

SR# 20213264703

You may verify this certificate online at corp.delaware.gov/authver.shtmlA handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204174555

Date: 09-16-21