(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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# Incorporating Services, Ltd.

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

Melissa Moreau mmoreau@incserv.com 850.656.7953

**REQUEST DATE 4/6/2022** 

**PRIORITY** Routine

**FROM** 

OUR REF # (Order ID#), Terri

**ORDER ENTITY** 

HIREDSCORE, INC.

# PLEASE PERFORM THE FOLLOWING SERVICES:

HIREDSCORE, INC.

Please file the attached qualification document.

# NOTES:

\$720.00 Authorized (\$70.00 filing fee, \$500.00 penalty and \$150.00 annual report fee)

Email address for annual report reminders: radiv@incserv.com

### RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

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

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.

## '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.

HiredScore, Inc				
	orporation; must include "INCORPORATED," ' orp," "Inc," "Co," or "Corp,")	COMPANY," "CORPORATIO	N."	
(If name unavaila	able in Florida, enter alternate corporate name add	opted for the purpose of transactir	ng business in Florida)	
Delaware	3			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
11/05/2013				
(Date	of incorporation)	(Date of duration, if other than perpetual)		
07/01/2021 5.				
7 158 Mercer Stree	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 t, Suite 4M, New York, NY 10012		ity)	
•	(Principal office	street address)		
			<b>2022</b> SEC	
<del></del>	(Current mailing a	address, if different)	APR 1	
	et address of Florida registered agent: (P.O. I Incorporating Services, Ltd.	Box NOT acceptable)	ARY C	
Name:		_	LL ST.	
Office Address:	1540 Glenway Drive	_	PM 12: 00	
	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.

Terri L. Hickman
(Registered agent's signature) Terri L. Hickman, as Assistant Secretary

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.

# DocuSign Envelope ID: 6ADBFC9A-D763-4D30-A868-9A546530BA5C A. DIRECTORS

AL DIRECTORS	Dank d	A. Kum					
□Chairman	Nume:	А. Кагр	□Chairman	Name:			
□Vice Chairman	Address: 1065	E. Lancaster Ave	□Vice Chairman	Address:	<u>_</u>		
Director	Suite 30B		□Director				
<b>■</b> President	Bryn Mawr, PA	A 19101	□President				
□Vice President			□Vice President				
<b>■</b> Secretary		□Treasurer	□Secretary		□Treasurer		
■Other CFO		□ Other	□Other	<del></del>	□Other		
□Chairman	Name:		□Chairman	Name:			
□Vice Chairman	Address:		□Vice Chairman	Address:			
□Director			□Director				
□President			□President				
□Vice President			□Vice President				
☐ Secretary		□Treasurer	□Secretary		□Treasurer		
□Other		□Other	□Other		□Other		
□Chairman	Name:		□Chairman	Name:			
□Vice Chairman	Address:		□Vice Chairman	Address:			
□Director			□Director				
□President			□President				
□Vice President			□Vice President				
☐ Secretary		□Treasurer	□Secretary		□Treasurer		
Other		□ Other	□Other		□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.   13.   14.   14.   15.   16.   17.   17.   18.   18.   19.   19.   10.							
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.							

R. Athena Karp



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

DELAWARE, DO HEREBY CERTIFY "HIREDSCORE, 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 TWENTY-THIRD DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HIREDSCORE, INC." WAS INCORPORATED ON THE FIFTH DAY OF NOVEMBER, A.D. 2013.

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

Authentication: 202988120

Date: 03-23-22