

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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From: Account Name : C T CORPORATION SYSTEM  
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### FOREIGN PROFIT/NONPROFIT CORPORATION

**Hound Labs, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	05
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S. FRANKLIN

OCT 11 2022

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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.*

1. Hound Labs, 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. Delaware 3. 46-5760386  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. May 12, 2014 5. Perpetual  
(Date of incorporation) (Date of duration, if other than perpetual)

6. May 16, 2022  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6114 La Salle Avenue, #507, Oakland, CA 94611  
(Principal office street address)  
6114 La Salle Avenue, #507, Oakland, CA 94611  
(Current mailing address, if different)

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

Name: Incorporating Services, Ltd.  
Office Address: 1540 Glenway Drive  
Tallahassee FL 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.*

Incorporating Services, Ltd.

By: Amanda Puchambault  
(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

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**A. DIRECTORS**

☐ Chairman Name: Michael Lynn

☐ Vice Chairman Address: 6114 La Salle Avenue

☒ Director #507

☐ President Oakland, CA 94611

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☒ Other CEO ☐ Other \_\_\_\_\_

☐ Chairman Name: John Lindgren

☐ Vice Chairman Address: 6114 La Salle Avenue

☐ Director #507

☐ President Oakland, CA 94611

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☒ Other CFO ☐ Other \_\_\_\_\_

☐ Chairman Name: Jill Fishbein

☐ Vice Chairman Address: 411 Borel Avenue

☐ Director Suite 603

☐ President San Mateo, CA 94402

☐ Vice President \_\_\_\_\_

☒ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: Mitch Lasky

☐ Vice Chairman Address: 6114 La Salle Avenue

☒ Director #507

☐ President Oakland, CA 94611

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

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☐ Chairman Name: Thomas Mawhinney

☐ Vice Chairman Address: 6114 La Salle Avenue

☒ Director #507

☐ President Oakland, CA 94611

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: William McComb

☐ Vice Chairman Address: 6114 La Salle Avenue

☒ Director #507

☐ President Oakland, CA 94611

☐ Vice President \_\_\_\_\_

☐ Secretary ☐ Treasurer

☐ 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. Jill Fishbein  
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. Jill Fishbein, Secretary  
(Typed or printed name and capacity of person signing application)

**Attachment to Florida Qualification by Foreign Corporation**

**Section 11: Additional Directors**

Director Name	Director Address
Dov Szapiro	6114 La Salle Avenue, #507, Oakland, CA 94611
Richard Wolf	6114 La Salle Avenue, #507, Oakland, CA 94611

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# Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOUND LABS, 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 FOURTH DAY OF OCTOBER, 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 FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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Jeffrey W. Bullock, Secretary of State

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