F23000003283

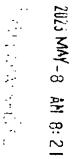
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	· <u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
W23000051303	3	

Office Use Only



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April 12, 2023

SUBRAMANIAM RAMAMIRTHAM 2701 PROSPERITY AVE, STE 203 FAIRFAX, VA 22031 US

SUBJECT: PLATEAU SOFTWARE, INC.

Ref. Number: W23000051303

We have received your document for PLATEAU SOFTWARE, 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):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

Persons listed in number 11 must have an address as well.,

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.

Andrea Andrews
Regulatory Specialist II

Letter Number: 923A00008215



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Plateau Software, Inc.			
	of corporation - n	aust include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to to	of Good Standing	g" and check are submi	Business in Florida." tted to register the
Please return all correspondence concerni	ng this matter to	he following:	
Subramaniam Ramamirtham			
	Name of Pers	on	-
Plateau Software Inc			
	Firm/Compan	y	
2701 Prosperity Ave, Ste 203			
-	Address		
Fairfax, VA 22031			
subra@plateauinc.com	City/State and Z	ip code	
E-mail address	: (to be used for fi	iture annual report noti	fication)
For further information concerning this ma	atter, please call:		
Subramaniam Ramamirtham	at ()	5411969	
Name of Person	Area Code	Daytime Telephor	e Number
STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	3 :	MAILING ADD Registration Sect Division of Corpo P.O. Box 6327 Tallahassee, FL	ion orations
Enclosed is a check for the following amore Please make check payable to: FLORIDA DE \$70.00 Filing Fee	PARTMENT OF : $Fee \& \Box 78		\$87.50 Filing Fee. Certificate of Status & Certified Copy

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.

(Enter name of	corporation: must include "INCORPORATED," "Corp." "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION,"	
(If name unavai	lable in Florida, enter alternate corporate name add	opted for the purpose of transacting b	usiness in Florida)
Washington	3 91	01-1943247	
(State or count 01/06/1999	ry under the law of which it is incorporated)	(FEI number, if applic	
	of incorporation)	(Date of duration, if other than	perpetual)
2701 Prosperity	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502 Ave, Ste 203. Fairfax VA 22031	orida, if prior to registration) F.S., to determine penalty liability)	
2701 Prosperity	(SEE SECTIONS 607.1501 & 607.1502	F.S., to determine penalty liability)	
2701 Prosperity	(SEE SECTIONS 607.1501 & 607.1502 Ave, Ste 203. Fairfax VA 22031 (Principal office s	F.S., to determine penalty liability)	211
·	(SEE SECTIONS 607.1501 & 607.1502 Ave, Ste 203. Fairfax VA 22031 (Principal office s	F.S., to determine penalty liability) street address) ddress, if different)	211/2 MMY -8
Name and stree	(SEE SECTIONS 607.1501 & 607.1502 Ave, Ste 203. Fairfax VA 22031 (Principal office government mailing a gent address of Florida registered agent: (P.O. B.)	F.S., to determine penalty liability) street address) ddress, if different)	ا تَتُ
. Name and stre	(SEE SECTIONS 607.1501 & 607.1502 Ave, Ste 203. Fairfax VA 22031 (Principal office government mailing a general education of the control of	atreet address) ddress, if different) ox NOT acceptable)	÷ ~

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.

Adam Saldana, 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.

· A. DIRECTORS □ Chairman ☐ Chairman Name: _____ □ Vice Chairman Address: 1701 Prosperity Ave □Vice Chairman Address: Ste 203, Fairfax VA 22031 □ Director □ Director Vishwenath S Kizhapandal President □ President □ Vice President □Vice President □ Secretary □ Treasurer □ Secretary ☐ Treasurer Other ____ □ Other _____ □Other ____ □Other _____ Ochairman Name: Mahalakshni Varadarajin Ovice Chairman Address: 2701 Prospanity Ara ☐ Chairman Name: _____ □ Vice Chairman Address: Ste 203, Fair Fex VA 22031 ☐ Director □ Director □President □President ☐ Vice President □Vice President □ Secretary □Treasurer □ Secretary ☐ Treasurer DOther CF3 □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 ____ 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. 03/20/2023 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.

Mahalakshmi Varadarajan, Chief Financial Officer



Secretary of State

1, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

PLATEAU SOFTWARE, INC.

1 CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 01/06/1999.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 12/28/2022 UBI Number: 601 923 446

R Hobbie

STATE OF WASHING

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State

Date Issued: 12/28/2022