F24000000053

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





400419948524

2021 JAN -4 PH 2: 59

2024 JAN -4 PM 3: 07

RECEIVED

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

ORDER FORM

TO Florida Department of State

FROM Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 01/04/2024

PRIORITY Routine

OUR REF # (Order ID#) Jacob

ORDER ENTITY

CIRCUL, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

CIRCUL, INC.

Please file the attached qualification filing.

NOTES:

\$70.00 Authorized

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.

COVER LETTER

TO:		tration Section ion of Corpor				
SUBJ	ECT:	CIRCUL, IN	c.			
	.,,,,,,,		Name of corpo	ration - mus	include suffix	
Dear S	Sir or M	adam:				
"Certil	ficate o	f Existence."	by Foreign Corporation or "Certificate of Goo orporation to transact l	d Standing"	and check are sub	et Business in Florida," omitted to register the
Please	return	all correspon	dence concerning this	matter to the	following:	
Kathry	n Clama	ar, Transaction	al Paralegal			
			Na	me of Person		
DLA F	Piper LL	P (US)				
			Firm	n/Company		
555 M	ission S	t., Ste 2400				
				Address		
San Fr	ancisco.	CA 94105				
			City/S	State and Zip	code	
			E-mail address: (to be	used for futt	ire annual report i	notification)
For fu	rther in	formation co	ncerning this matter, p	lease call:		
Kathry	n Clama	ar	415 at (830	6-2540	
	Nam	e of Person			Daytime Telep	hone Number
	Regis Divis The C 2415	tration Section of Corpore Centre of Tall	rations ahassee treet, Suite 810		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
Please	make ch	ieck payable to	following amount: : FLORIDA DEPART: 378.75 Filing Fee & Certificate of Status	: □ \$78.	FATE 75 Filing Fee & ified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 20, 2023



The name CIRCUL, INC. has been reserved for 120 days beginning November 20, 2023. The reservation number is R23000000271 and this reservation is NONRENEWABLE.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lantham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (850) 488-9000, the Name Availability Section

KAIN COSTELLO

Letter number: 723A00026743

Account number: I20160000072

Amount charged: 35.00

State of Florida Secretary of State

APPLICATION TO RESERVE A CORPORATE NAME

1.	The name to be reserved:				
	Circul, Inc.				
2.	Name, address, and signature of applicant: Kathryn Clamar, Transactional Paralegal				
	DLA Piper LLP (US),555 Mission St., Ste 24	00			
	(Street Address) San Francisco, CA 94105 (City, State, Zip Code)				
Date: _	11/16/2023				
Eath OF 90	usigned by: uryh (Lamar 179031AB6475				
(Signatur	yn Clamar, Transactional Paralegal	*1.*			
(Type or	Print Name)				

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.

Delawarc	able in Florida, enter alternate corporate name a	, ,	
(State or countr	y under the law of which it is incorporated)	(FEI number, if a	pplicable)
	023		
(Date	of incorporation) 5.	(Date of duration, if other	than perpetual)
	•		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15		lity)
13577 Feather So	ound Drive Suite 520 Clearwater, FL 33762		
	•	ee <u>street</u> address)	
13577 Feather S	ound Drive Suite 520 Clearwater, FL 33762		
	(Current mailing	g address, if different)	
Name and street	et address of Florida registered agent: (P.O	. Box NOT acceptable)	2024
Name:	Seng Sun		
	13577 Feather Sound Drive Suite 520		2024 JAN -4
ffice Address:	Clearwater	, Florida 33762 (Zip code)	3
ffice Address:	Olean water		14
ffice Address:	(City)	(Zip code)	<u></u> <u></u>
		(Zip code)	PM 3: 07
Registered ag	ent's acceptance:		~
Registered ag wing been nan signated in this		e of process for the above state tent as registered agent and agr	ed corporation at the pa ree to act in this capaci

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: Seng Sun		Name: Curtis L. Mo	
□Vice Chairman	Address: 13577 Feather Sound Drive	□Vice Chairman	Address: 3203 Hanover Street	
Suite 520		□Director	Suite 100	
President	Clearwater, FL 33762	□President	Palo Alto, CA 94304	
□Vice President		□Vice President		
Secretary	■ Treasurer	Secretary	□Treasurer	
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	
□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	
individuals may be		ttachment will be image ment of State Annual R	ed for reporting purposes only. Non-indexed eport form.	
12. SUMA SUL		r or Officer		
The officer or dire she is aware that fits.817.155, F.S.	ctor signing this document (and who is listed in num alse information submitted in a document to the Dep	ber 11 above) affirms the artment of State constitu	nat the facts stated herein are true and that he or utes a third degree felony as provided for in	
Seng Sun	CEO			



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

DELAWARE, DO HEREBY CERTIFY "CIRCUL, 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 THIRD DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CIRCUL, INC."

WAS INCORPORATED ON THE THIRTEENTH DAY OF DECEMBER, A.D. 2023.

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

Authentication: 202518055

Date: 01-03-24