

F24000002863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

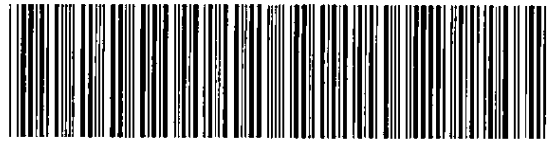
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

MAY 31 2024

K. Brumley

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: BROOK 5/31

CERTIFIED COPY

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FOREIGN INC

1. CROWDSTRIKE ASPM, INC.

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CrowdStrike ASPM, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Name of Person

Firm/Company

Address

City/State and Zip code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$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.*

1. CrowdStrike ASPM, 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. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 23, 2020 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 150 Mathilda Place, Suite 300, Sunnyvale California 94086
(Principal office street address)

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

2024 MAY 31 PM 3:19

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.

Kelly Marinelli Corporation Service Company

(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]:

A. DIRECTORS☐ Chairman Name: See attachment.☐ Vice Chairman Address: _____☐ Director _____☐ President _____☐ Vice President _____☐ Secretary ☐ Treasurer☐ Other _____ ☐ Other _____☐ Chairman Name: _____☐ Vice Chairman Address: _____☐ Director _____☐ President _____☐ Vice President _____☐ Secretary ☐ Treasurer☐ Other _____ ☐ Other _____☐ Chairman Name: _____☐ Vice Chairman Address: _____☐ Director _____☐ President _____☐ Vice President _____☐ Secretary ☐ Treasurer☐ Other _____ ☐ Other _____☐ Chairman Name: _____☐ Vice Chairman Address: _____☐ Director _____☐ President _____☐ Vice President _____☐ Secretary ☐ Treasurer☐ Other _____ ☐ Other _____☐ Chairman Name: _____☐ Vice Chairman Address: _____☐ Director _____☐ President _____☐ Vice President _____☐ Secretary ☐ Treasurer☐ Other _____ ☐ Other _____☐ Chairman Name: _____☐ Vice Chairman Address: _____☐ Director _____☐ President _____☐ 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. Eva DeVito
 4C5JB4EA8269433

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.

Eva DeVito

CrowdStrike ASPM, Inc.

Officers

<i>Name</i>	<i>Title</i>	<i>Business Address</i>
Burt Podbere	President	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Cathleen Anderson	VP, Secretary	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Michael Forman	VP, Treasurer	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Tiffany Buchanan	Sr. VP, Finance	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Nina Wang	VP, Tax	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Anurag Saha	VP, CAO	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Deanna Butler	VP, Legal, Asst Sec	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Eva DeVito	Assistant Secretary	150 Mathilda Place, Suite 300, Sunnyvale CA 94086

Directors

<i>Name</i>	<i>Title</i>	<i>Business Address</i>
Michael Forman	Director	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Tiffany Buchanan	Director	150 Mathilda Place, Suite 300, Sunnyvale CA 94086
Anurag Saha	Director	150 Mathilda Place, Suite 300, Sunnyvale CA 94086

Delaware

The First State

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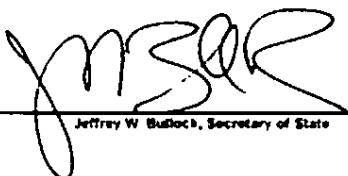
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CROWDSTRIKE ASPM, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF MAY, A.D. 2024.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CROWDSTRIKE ASPM, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF JANUARY, A.D. 2020.

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




Jeffrey W. Bullock, Secretary of State