To

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lo:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062

Phone : (323)962-8600

Fax Number : (323)389-0502

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION CODETRU, INC.

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### **COVER LETTER**

TO: Registration Section Division of Corporation	าร		
SUBJECT: CODETRU, INC.			
Sobalici.	Name of corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by F "Certificate of Existence," or "G above referenced foreign corpo	Certificate of Good Stan	ding" and check are subr	t Business in Florida," mitted to register the
Please return all correspondence	e concerning this matter	to the following:	
Mike Town			
	Name of I	Person	
Legalzoom.com, Inc.			
	Firm/Com	pany	
9900 Spectrum Dr			
	Addre	SS	
Austin, TX 78717			
	City/State ar	nd Zip code	
accounts@tekinvaderz.com			
E-m	ail address: (to be used f	or future annual report n	otification)
For further information concern	ning this matter, please ca	all:	
Mike Town	at ( 800	773-0888	
Name of Person	at ( <sup>800</sup> Area Code	: Daytime Teleph	none Number
STREET/COURIER Registration Section Division of Corporation The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	ns see , Suite 810	MAILING A Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
	ORIDA DEPARTMENT	OF STATE I \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

Ta:

# 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.

(If name unavails	ble in Florida, enter alternate corporate name add	opted for the purpose of transacting business in Florida)
Illinois	3. 82 under the law of which it is incorporated)	-3909985
(State or country 01/04/2018		
	of incorporation)	(Date of duration, if other than perpetual)
2490 E OAKTON	(SEE SECTIONS 607.1501 & 607.1502, ST, ARLINGTON HEIGHTS, IL 60005 (Principal office s	
	(Principal office §	addicss)
	(Current mailing a	ddress, if different)
Name and stree	address of Florida registered agent: (P.O. E	Box NOT acceptable)
Name:	Vamsi Krishna	_
ffice Address:	4532 Almada Ln	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Wesley Chapel	, Florida 33543 (Zip code)
	(City)	

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.

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

To

#### A. DIRECTORS Sowmya Yadlapati □ Chairman □Chairman 2490 E OAKTON ST □Vice Chairman Address: ☐Vice Chairman Address: ARLINGTON HEIGHTS, IL 60005 □Director Director □President President □Vice President □ Vice President \_\_\_\_\_ ☐Tœasuœr Secretary Treasurer Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_\_ Name: \_\_\_\_\_ □ Chairman Name: ☐ Chairman Address: □ Vice Chairman □Vice Chairman Address: Director □ Director □President □ President □Vice President □Vice President \_\_ ☐ Ireasurer ☐Secretary Treasurer □ Secretary □Other \_\_\_\_\_ Other \_\_\_ □Other \_\_\_\_\_ □Other \_\_\_ Name: \_\_\_\_\_ □Chsirman Name: ○Chairman Address: \_\_\_\_\_ □Vice Chairman □Vice Chairman Address: \_\_\_\_\_ Director □Director □President □ President □Vice President □ Vice President \_\_ □Treasurer □ Secretary ☐Treasurer □ Secretary Other \_\_\_\_\_ DOther \_\_\_\_\_ □ 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. 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. Sowmya Yadlapati, President

## File Number

7161-892-7



## To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

CODETRU, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 04, 2018, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, 1 hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH day of JULY A.D. 2024.

Authentication #: 2421203870 venflable until 07/30/2025

Authenticate at: https://www.ilsos.gov

Alexi Dianard