

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUN 24 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98000004208

1. Corporation Name

ShareData, Inc.

2. Principal Office Address

4500 Bohannon Drive

Suite, Apt. #, etc.

City & State

Menlo Park, CA

Zip

94025

Country

USA

3. Mailing Office Address

4500 Bohannon Drive

Suite, Apt. #, etc.

City & State

Menlo Park, CA

Zip

94025

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/23/1998

5. FEI Number

77-0054242

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Deborah D. Skipper

Deborah D. Skipper
Asst. V. Pres.

Date 6/23/03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Russell S. Elmer	4500 Bohannon Drive	Menlo Park, CA 94025
T	Shane Mulron	10951 White Rock Road	Rancho Cordova, CA 95670
V	Mark Douglas	4500 Bohannon Drive	Menlo Park, CA 94025
S	Cynthia Bock	4500 Bohannon Drive	Menlo Park, CA 94025

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Cynthia Bock

Cynthia Bock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/2003

Date

650-331-6186

Daytime Phone #

CR2E081 (10/02)

Page 2 of 2



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 970684 7188063

AUTHORIZATION : Patricia Pigato

COST LIMIT : \$ 1350.00

ORDER DATE : March 17, 2003

ORDER TIME : 12:45 PM

ORDER NO. : 970684-110

CUSTOMER NO: 7188063

CUSTOMER: Adriana Botto
E*trade Group, Inc.
4500 Bohannon Drive

Menlo Park, CA 94025-1041

DOMESTIC FILINGS

NAME: SHAREDATA, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea

EXAMINER'S INITIALS _____

RECEIVED
03 JUN 24 AM 8:32
STATE
DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

File
1/28