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TO:

Registration Section

Div	ision of Corporatio	ns		•		
UBJECT:	OPENMAIL LLC					
	Name of Limited Liability Company					
he enclosed kistence, ar	l "Application by Fo nd check are submitt	reign Limited Liability Comed to register the above refer	pany for Authorization to T enced foreign limited liabili	ransact Business in Florida," Certificate ty company to transact business in Flori		
ease return	all correspondence	concerning this matter to the	following:			
	Matt Boisen					
	Name of Person					
	OpenMail LLC	2	•			
	Firm/Company					
	10900 NE 8th Street, Suite 800					
	Address					
	Bellevue,WA	98004				
		City/S	tate and Zip Code			
	matt.boisen@in	fospace.com				
		E-mail address: (to be use	d for future annual report no	otification)		
or further ir	formation concernit	ng this matter, please call:				
Matt Boisen		425 283-8 at ()	577			
	Name	of Contact Person		ytime Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	check for the follow 125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RESIDES. IN THE STATE OF FLORIDA

, OpenMail LLC		-				
1 · · ·	eign Limited Liability Company; mi	ust include "Limited Lia	bility Company," "L.L.C.," or	"LLC.")		
(If name unavailable, enter a Liability Company," "L.L.C,	lternate name adopted for the purpo " or "LLC.")	se of transacting busines	s in Florida. The alternate nam	ne must includ	e "Limi	ted
2. Delaware		3 46-3653021				
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicable)	<u> </u>		
4. 8 -	10-16					
	(Date first transacted busin (See sections 605.0904 & 605	ess in Florida, if prior to 5.0905, F.S. to determine	registration.) penalty liability)	_		
5. 1501 Main Street, Suit	te 201			.		
Venice, CA 90291						
	(Street Address of	Principal Office)		•		
6. 1501 Main Street, Suite	e 201			- AE	₹	
Venice, CA 90291		,			<u>~</u>	
	(Mailing	Address)		·	ਨ	Ŧ
7. Name and street address	ss of Florida registered agent: (F	P.O. Box NOT accept	able)	NSE NEW	17	
Name:	C T Corporation System		·	OF S	4H 10: 40	ΕD
Office Address:	1200 South Pine Island Road		-	ORIC	٠. ن	
	Plantation		, Florida 33324	¥™	0	
	(City)		(Zip code)	-		
designated in this applica to complywith the provisi	egistered agent and to accept ser uton, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.	itment as registered a proper and complete	gent and agree to act in thi	s capacity. I	I furthe	er agree
	tumm to	more fl		•		•
8. The name, title or caps		Yerdecchia nature) tant Secretary) who has/have author	ity to manage is/are:			
Michael Blend, Member	·			•		
1501 Main Street, Suite 2	01					
Venice, CA 90291					,	
		certificate is in a foreig	gn language, a translation of			
	Agnatur	of an authorized person	1			
This document is executed submitted in a document to	I in accordance with section 605. the Department of State constit	.0203 (1) (b), Florida S utes a third degree felo	Statutes. I am aware that any ony as provided for in s.817.	false inform 155, F.S.	ation	
	Matt Boisen					

Typed or printed name of signee

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "OPENMAIL LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTY-FIRST DAY OF JULY, A.D. 2016.

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

16 AUG 17 AM IO: LO
SCORDIARY OF STATE
TALLAHASSEF FI OBINA

Arffray W. Bullinch, Socretary of Elate

Authentication: 202695049

Date: 07-21-16

5399161 8300 SR# 20165006149