Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200001435973)))



H200001435973ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

CSC 'TRANSO2

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

**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 Limited Liability Company Palo Alto Networks Financial Services, LLC

Certificate of Status	U
Certified Copy	0
Page Count	03
Estimated Charge	S125.00

Electronic Filing Menu Corporate Filing Menu

Help

H20000143597 3

CSC 'TRANSO2

5/18/2020 3:15:18 PM PAGE

3/006 Fax Server

850-617-6381

5/15/2020 8:35:55 AM PAGE 1/001 Fax Server

; U



May 15, 2020

FLORIDA DEPARTMENT OF STATE Division of Corporations

CSC

SUBJECT: PALO ALTO NETWORKS FINANCIAL SERVICES, LLC

REF: W20000048036

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please calī (850) 245-6051.

Yvette Scott Document Specialist II

FAX Aud. #: H20000143597 Letter Number: 220A00009885 -82:1547Å7:36893Å0-}Å&{"/*(%/Å,%%*Å#="Å(%/Ã*) \$"(%, (U

H20000143597 3

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

IN COMPLIANCE WITH NECTION 605.6902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	Limited Liability Company, must enclude "Lunite	d Liabilit	y Company," "L L C ," or "LLC ")	220 ALL	
				LANGE CREE	1
If name unavailable, enter alternate ri	sime scopted for the purpose of transacting business in Fig.	orida. The a	lterrate name must include "Limited Liabilit		سننشئ ا
DE 2		3.	85-0742571	د الد 14 الد 14 الد	Ī
(Junediction under the inscot w)	high foreign (imited liability company is organized)		(Fi:I sumber	ut applicable)	
Upon filing				: 47 TATE DRIDA	
	(Date first transacted business in Plonda, if prior to (See sections 605 0904 & 605 0905, P.S. to determ	registration inc penalty	lisbility)		
3000 Tannery Way		6	3000 Tannery Way		
). (Street Address of i	and bei Office)	ζ.	(Manug Address	7	
Santa Clara, CA 950	54		Santa Clara, CA 95054		

	Am. 11	\$ 775.HP			
7. Name and street addres	ss of Florida registered agent. (P.O. Bo:	C VOT	acceptable)		
	Corporation Service Company				
Name.					
Office Address.	1201 Hays Street				
Office Address.					
	Tallahassee		32301 , Florida		
	(Cuy)		(Zap code)		

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Corporation Service Company	<u>.</u>
(Kegistered agent's signature)	

Amanda Robinson, Asst. Vice Fresident

-82:1547Å 7:36893ÅD-}Å&{'7*(%/Å,%%*Å#+**Å(%/ Å*I \$ (% ; (I

H20000143597 3

Storme Palo Alto Networks, Inc.		
Name Talo Add Networks, the	Manager	Name.
Address	⋈ Member	Address.
Santa Clara, CA 95054	Authorized	202
	Person	CR S T
Other	Other	m. m
Name	Manager	Name: OF STATE OF STA
	_	Address: P
Other		Other
Name	Manager	Name
Address.	Member	Address.
	Authorized	
	Person	
Other	Other	Other
may be added to the index when filing your Fi tificate of existence, no more than 90 days old, he law of which it is organized. (If the certifical st be submitted)	lorida Department of Stat duly authenticated by the te is in a foreign language (1) (b), Florida Statutes	e Annual Report form. c official having custody of records in the cartificate under a translation of the certificate under to I am aware that any false information
	Santa Clara, CA 95054 Other	Santa Chara, CA 95054 Santa Chara, CA 95054 Authorized

H20000143597 3



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PALO ALTO NETWORKS FINANCIAL SERVICES, 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 THIRTEENTH DAY OF MAY, A.D. 2020 AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PALO ALTO NETWORKS FINANCIAL SERVICES, LLC" WAS FORMED ON THE THIRTEENTH_ OF APRIL, A.D. 2020.

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

Authentication: 202927414

Date: 05-13-20