

F14000002831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

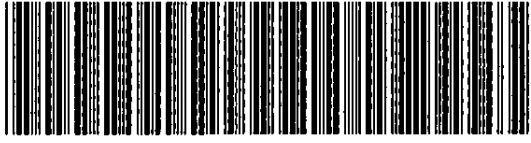
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
~~1114-374357~~

Office Use Only



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06/13/14--01009--005 \*\*70.00

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AND  
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14 JUN 30 PM 4:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VH

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** LeapYear Innovations, 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:

COLTON JANG

\_\_\_\_\_  
Name of Person

LeapYear Innovations, Inc.

\_\_\_\_\_  
Firm/Company

700 HURON AVENUE #16C

\_\_\_\_\_  
Address

CAMBRIDGE, MA, 02138

\_\_\_\_\_  
City/State and Zip code

COLTON@LEAPYEAPYEARINNOVATIONS.COM

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

For further information concerning this matter, please call:

COLTON JANG

925 7856105

at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 16, 2014

COLTON JANG  
700 HURON AVENUE #16C  
CAMBRIDGE, MA 02138

SUBJECT: LEAP YEAR INNOVATIONS, INC.  
Ref. Number: W14000037437

We have received your document for LEAP YEAR INNOVATIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return the corrected original and one copy of 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 call (850) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 314A00013025

**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.*

LeapYear Innovations, Inc.

1. \_\_\_\_\_  
(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)

DELAWARE

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

3/14/14

PERPETUAL

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

700 HURON AVENUE #16C, CAMBRIDGE, MA 02138

7. \_\_\_\_\_  
(Principal office address)

700 HURON AVENUE #16C, CAMBRIDGE, MA 02138

\_\_\_\_\_  
(Current mailing address)

OPTIMIZATION CONSULTING AND MECHANISM DESIGN

8. \_\_\_\_\_  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

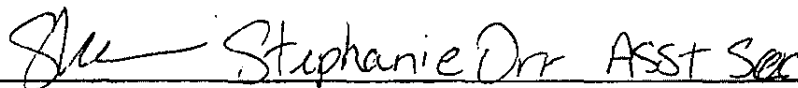
Name: National Corporate Research, Ltd., Inc.

Office Address: 155 Office Plaza Drive

Tallahassee, Florida 32301  
(City) (Zip code)

10. 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.*



(Registered agent's signature)

11. 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.

14 JUN 30 PM 4: 54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

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AND  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Ishaan Nerurkar  
Address: 700 Huron Avenue #16C, Cambridge MA 02138

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: Colton Jang  
Address: 700 Huron Avenue #16C, Cambridge MA 02138

Director: Karsten Coates  
Address: 700 Huron Avenue #16C, Cambridge MA 02138

**B. OFFICERS**

President: Ishaan Nerurkar  
Address: 700 Huron Avenue #16C, Cambridge MA 02138

Vice President: Karsten Coates  
Address: 700 Huron Avenue #16C, Cambridge MA 02138

Secretary: Colton Jang  
Address: 700 Huron Avenue #16C, Cambridge MA 02138

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

13. Colton Jang, Chief Operations Officer  
(Typed or printed name and capacity of person signing application)

# Delaware

*The First State*

APPROVED  
AND  
FILED

JUN 30 PM 4:55

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

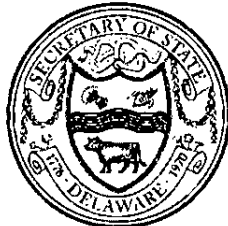
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LEAPYEAR INNOVATIONS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF JUNE, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEAPYEAR INNOVATIONS, INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF MARCH, A.D. 2014.

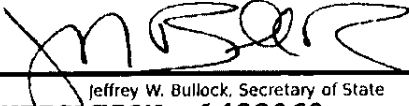
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5499010 8300

140808520



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1433068

DATE: 06-06-14