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To:

Division of Corporations

Fax Number : (850)617-6383

From:

:1.

ထ်

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803

Fax Number (813)436-5206

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

FOREIGN PROFIT/NONPROFIT CORPORATION

Comcate Software, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Help

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

<u>.</u>	ire, Inc.	ZOA (B. CANA " WOODBOD A TITOM "		
	orporation; must include "INCORPORATED," "Corp." "Inc." "Co." or "Corp.")	OMPANY, "CORPORATION.		
	able in Florida, enter alternate corporate name adop	oted for the purpose of transacting busine	ess in Florida)	
California	3			
(State or countr	y under the law of which it is incorporated)			
08/06/2007	of incorporation) 5.			
(Date	of incorporation)	(Date of duration, if other than per	on, if other than perpetual)	
····	(Date first transacted business in Flo	rida, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607.1502,			
9450 SW Gemini	Dr PMB 61173 Beaverton, Oregon 97008-7105 US			
	(Principal office <u>s</u>	reet address)		
			2 78	
	(Current mailing ad	dress, if different)	olsi o	
			Z 28	
Name and street	et address of Florida registered agent: (P.O. B	ox NOT acceptable)	, J	
Name:	Registered Agents Inc		MSION OF CORPORATION	
٠.	7901 4th St N STE 300	-	- 3	
Tice Address:	7507 10111 312 500	-	21	
mee Audress.	C. Danasahaan	, Florida 33702	10	
fice Address.	St. Petersburg	r ionua		

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.

07.4

6/26/2024 14 01: 1 7 PDT	

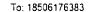
Ta: 18506176383

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	aut	۶.	بەرى <u>.</u>

Fax: 8134365206

A. DIRECTORS				
X Chairman (ii''	David Richmond Name:	Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	
∐Director	Piedmont, CA 94610	□ Director		
□President '		□President		
□Vice President		□ Vice President		
☐Secretary	☐ Treasurer	☐ Secretary		□Treasurer
[]Other - **	□Other	C)ther		□Other
n GChairman	Name:	Chairman	Name:	
: ⊡Vice Chaimpan	Address:	□ Vice Chairman	Address:	
- FiDirector		CiDirector		
∐President		President		
□Vice President		□ Vice President		
□Secretary ==	□Treasurer	□ Secretary		□Treasurer
□Other	□Other	Other	**************************************	Other
Chairman	Name:	□Chairman	Name:	
• •	Address:			
President		Dresident		
□Vice President		□ Vice President		
	□Treasurer	□ Secretary		□Treasurer
Other	□Other	Other		□Other
individuals may be	Use an attachment to report more than six (6) e added to the index when filing your Florida delichmend Signature of I		port form.	
The officer or dire	eter signing this document (and who is listed	in number 11 above) affirms th	at the facts sta	ted herein are true and that he a

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 of given 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.





Fax: 8134365206



25, 35

6/26/2024 14:01:17 PDT4 . . .

Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: COMCATE SOFTWARE, INC.

Entity No.: 3011326
Registration Date: 08/06/2007

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

.. Status://. Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 26, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

1244 Certificate No.: 223601822