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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : INCORPORATING SERVICES FL
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION
GLOBESHERPA INC.

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|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
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2016 MAR 11 AM 10:54
TALLAHASSEE FLORIDA

MAR 14 2016
J. HARRIS

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.

1. GLOBESHERPA INC.

(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)

2. OREGON

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. FEBRUARY 9, 2009

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. _____

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

7. 1000 SW BROADWAY, SUITE 1800, PORTLAND, OREGON 97205

(Principal office address)

c/o RIDESCOUT LLC, 200 E. 6TH STREET, SUITE 200, AUSTIN, TX 78701

(Current mailing address, if different)

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

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, FL 33324, Florida 33324
(City) (Zip code)

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9. **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.

NRAI Services, Inc.

by: Shari Stoutenburg Shari Stoutenburg, Asst. Secretary
(Registered agent's signature)

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.

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

A. DIRECTORS

Chairman: JOSEPH KOPSER
Address: 1000 SW BROADWAY, SUITE 1800
PORTLAND, OR 97205

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: NATHANIEL D.W. PARKER
Address: 1000 SW BROADWAY, SUITE 1800
PORTLAND, OR 97205

Vice President: JOSE VALERA, GENERAL COUNSEL
Address: 1000 SW BROADWAY, SUITE 1800
PORTLAND, OR 97205

Secretary: SADHANA SHENOY
Address: 1000 SW BROADWAY, SUITE 1800
PORTLAND, OR 97205

Treasurer: _____
Address: _____

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

12. Jose Valera
4862F3062726487...
Signature of Director or Officer

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 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. JOSE VALERA, GENERAL COUNSEL
(Typed or printed name and capacity of person signing application)

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

Certificate of Existence 785U803C2

I, JEANNE P. ATKINS, SECRETARY OF STATE, and Custodian of the Seal of said State, do hereby certify:

GLOBESHERPA INC.

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

A handwritten signature in cursive script that reads "Jeanne P. Atkins".

JEANNE P. ATKINS, SECRETARY OF STATE

3/10/2016