## F21000000361

(Requestor's Name)					
(Address)					
(Address)					
	(City/State/Zip/Phone #)				
DICK-U	P WAIT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer					

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APPROYED AND FILED

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19 PM 2: 32

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CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 453046 7875106

AUTHORIZATION: Signelle Man

COST LIMIT : \$ 70.00

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ORDER DATE: October 9, 2020

ORDER TIME : 10:15 AM

ORDER NO. : 453046-045

CUSTOMER NO: 7875106

## FOREIGN FILINGS

NAME: SPRINKLR, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: \_\_\_\_\_\_

## 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.

(If name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in Florida)		
Delaware		45-4771485		
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
08/22/2011				
(Date of incorporation)		(Date of duration, if other than perpetual)		
Upon Filing				
9 W 35 St. 7 Fl.	New York, NY 10001	1502, F.S., to determine penalty liability)		
29 W 35 St. 7 Fl.		fice <u>street</u> address)		
29 W 35 St. 7 Fl.	(Principal of	fice <u>street</u> address)		
	(Principal of	fice <u>street</u> address)		
	(Principal off	fice street address) ing address, if different)		
Name and <u>stre</u> d Name:	(Principal off (Current maili et address of Florida registered agent: (P.	fice street address)  ing address, if different)  O. Box NOT acceptable)		
Name and stree	(Principal off (Current maili et address of Florida registered agent: (P.o Corporation Service Company	fice <u>street</u> address)		

## 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.

Corporation Service Company

By: Juzula & Foliage

(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.

A. DIRECTORS					
□Chairman	Name: Ragy Thomas	□ Chairman	Name: Carlos Dominguez		
□Vice Chairman	Address: 29 West 35 Street, 8th Floor	□Vice Chairman	Address: 29 West 35 Street, 8th Floor		
■Director	New York, NY 10001	Director	New York, NY 10001		
□President		□President			
□Vice President		□Vice President			
☐ Secretary	Treasurer	☐ Secretary	□Treasurer		
□Other	□Other	□Other	Other		
□ Chairman	Name:	□Chairman	Name:		
□Vice Chairman	Address: 29 West 35 Street, 8th Floor	□Vice Chairman	29 West 35 Street, 8th Floor		
Director	New York, NY 10001	Director	New York, NY 10001		
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	□ Secretary	☐ Treasurer		
□Other	□Other	□Other	Other		
	Matthew Jacobson	<b>-</b>	Name: Neeraj Agrawal		
□ Chairman	Name:	□Chairman	29 West 35 Street, 8th Floor		
□Vice Chairman	Address:New York, NY 10001	□Vice Chairman	Address:		
Director		Director			
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	□Secretary	Treasurer		
□Other	□Other	□Other	Other		
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.					
12. 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.  Daniel Haley - Secretary					

Sprinklr, Inc. Directors List:

• • •

RAGY THOMAS
29 WEST 35 STREET, 8TH FLOOR
NEW YORK, NY 10001

CARLOS DOMINGUEZ 29 WEST 35 STREET, 8TH FLOOR NEW YORK, NY 10001

EDWIN GILLIS 29 WEST 35 STREET, 8TH FLOOR NEW YORK, NY 10001

JOHN CHAMBERS 29 WEST 35 STREET, 8TH FLOOR NEW YORK, NY 10001

MATTHEW JACOBSON 29 WEST 35 STREET, 8TH FLOOR NEW YORK, NY 10001

NEERAJ AGRAWAL 29 WEST 35 STREET, 8TH FLOOR NEW YORK, NY 10001

YVETTE KANOUFF 29 WEST 35 STREET, 8TH FLOOR NEW YORK, NY 10001



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

DELAWARE, DO HEREBY CERTIFY "SPRINKLR, 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 TWENTY-FOURTH DAY OF DECEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPRINKLR, INC."

WAS INCORPORATED ON THE TWENTY-SECOND DAY OF AUGUST, A.D. 2011.

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

Authentication: 204413241

Date: 12-24-20

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