



**Secretary of State  
Statement of Information**  
(California Stock, Agricultural  
Cooperative and Foreign Corporations)

SI-550

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**FILED**  
**Secretary of State**  
**State of California**

**JUN 20 2017**

*1/NF/PC*  
This Space For Office Use Only

**IMPORTANT** — Read instructions before completing this form.

Fees (Filing plus Disclosure) — \$25.00;

Copy Fees — First page \$1.00; each attachment page \$0.50;  
Certification Fee — \$5.00 plus copy fees

1. **Corporation Name** (Enter the exact name of the corporation as it is currently recorded with the California Secretary of State)

Satori Worldwide, Inc.

2. 7-Digit Secretary of State File Number

**C3989449**

**3. Business Addresses**

a. Street Address of Principal Executive Office - Do not list a P.O. Box 2225 East Bayshore Road, Suite 200	City (no abbreviations) Palo Alto	State CA	Zip Code 94303
b. Mailing Address of Corporation, if different than Item 3a	City (no abbreviations)	State	Zip Code
c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box	City (no abbreviations)	State CA	Zip Code

**4. Officers**

The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added, however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/ Kristen	First Name	Middle Name	Last Name Dumont	Suffix
Address 2225 East Bayshore Road, Suite 200			City (no abbreviations) Palo Alto	State CA Zip Code 94303
b. Secretary Victoria	First Name	Middle Name	Last Name Valenzuela	Suffix
Address 2225 East Bayshore Road, Suite 200			City (no abbreviations) Palo Alto	State CA Zip Code 94303
c. Chief Financial Officer/ Kristen	First Name	Middle Name	Last Name Dumont	Suffix
Address 2225 East Bayshore Road, Suite 200			City (no abbreviations) Palo Alto	State CA Zip Code 94303

**5. Director(s)**

California Stock and Agricultural Cooperative Corporations ONLY; Item 5a: At least one name and address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions)

a. First Name	Middle Name	Last Name	Suffix
Address			City (no abbreviations) State Zip Code
b. Number of Vacancies on the Board of Directors, if any			

**6. Agent for Service of Process**

Item 6a and 6b: If the agent is an individual, the agent must reside in California and Item 6a and 6b must be completed with the agent's name and California address. Item 6c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 6c must be completed (leave Item 6a-6b blank).

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is not a corporation) - Do not list a P.O. Box			City (no abbreviations) State Zip Code
c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 6a or 6b CT Corporation System			

*CD168406*

**7. Type of Business**

Describe the type of business or services of the Corporation  
Technology

8. The information contained herein, including in any attachments, is true and correct.

2/17/17

Date

*Victoria Valenzuela*

Type or Print Name of Person Completing the Form

*Secretary*

Title

*[Signature]*

Signature