

4/23/2021

Division of Corporations

F2100002447

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000163356 3)))



H210001633563ABC.

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

From: Account Name : COGENCY GLOBAL, INC.
Account Number : I20000000088
Phone : (800)221-0102
Fax Number : (800)944-6607

****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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TALLAHASSEE, FLORIDA

21 MAY -4 AM 9:15
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TALLAHASSEE, FLORIDA
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**FOREIGN PROFIT/NONPROFIT CORPORATION
MARPAI, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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Corporate Filing Menu

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Handwritten initials/signature

Please keep original file date of 4/23/21



April 26, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

COGENCY GLOBAL INC

SUBJECT: MARPAI INC
REF: W21000057150

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return 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) 245-6051.

Sharon D Franklin
Regulatory Specialist II

FAX Aud. #: H21000163356
Letter Number: 921A00008612

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. Marpai, 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. Delaware 3. 86-1916231
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 22, 2021 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. April 1, 2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5701 East Hillsborough Ave., Suite 1417, Tampa, FL 33610
(Principal office street address)

(Current mailing address, if different)

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

Name: Cogency Global
Office Address: 115 North Calhoun Street, Suite 4
Tallahassee, Florida 32301
(City) (Zip code)

9. Registered agent's acceptance:

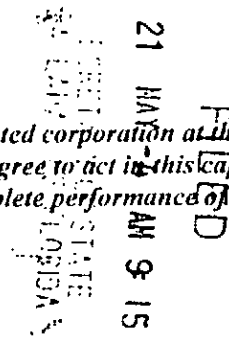
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

/s/ Jacqueline Almeida, Assistant 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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:



A. DIRECTORS

Chairman Name: Edmundo Gonzalez
 Vice Chairman Address: 5701 East Hillsborough ave, Suite 1417
 Director Tampa, FL 33610
 President
 Vice President
 Secretary Treasurer
 Other CEO Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name: Yaron Eitan
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name: Damien Francis Lamendola
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 Other Other

Chairman Name:
 Vice Chairman Address:
 Director
 President
 Vice President
 Secretary Treasurer
 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] 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. Edmundo Gonzalez
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MARPAI, 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-SIXTH DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MARPAI, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF JANUARY, A.D. 2021.

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



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

4837161 8300

SR# 20211062070

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202834282

Date: 03-26-21