## F2200001326

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





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#### **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: Content Square, Inc.						
Name of corporation - must include suffix						
·						
Dear Sir or Madam:						
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.						
Please return all correspondence concerning this matter to the following:						
Arnaud Gouachon						
Name of Person						
Content Square, Inc.						
Firm/Company						
53 Beach Street, 6th Floor						
Address						
New York, NY 10013						
City/State and Zip code						
legal.americas@contentsquare.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Person Area Code Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section						
Division of Corporations Division of Corporations						
The Centre of Tallahassee P.O. Box 6327						
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303						
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE						

□ \$70.00 Filing Fee □ \$78.75 Filing Fee & □ \$78.75 Filing Fee &

□ \$87.50 Filing Fee,

### 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

· Content Square			
tine.," "Co.," "C	corporation; must include "INCORPORATE Corp." "Inc." "Co." or "Corp.")	Đ.	" "COMPANY," "CORPORATION,"
(If name unavai	able in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida
Delaware		3. 81-4065183	
(State or count	ry under the law of which it is incorporated)	,	(FEI number, if applicable)
October 5, 2010	5	5.	
(Date of incorporation)			(Date of duration, if other than perpetual)
November 24, 1	2020		
<del></del>			n Florida, if prior to registration) i02, F.S., to determine penalty liability)
53 Beach Street,	6th Floor, New York, NY 10013		
	(Principal o	آآاه	ce <u>street</u> address)
			A.
	(Current ma	ilin	g address, if different)
			g address, if different)
. Name and stree	<u>et address</u> of Florida registered agent: (l	P.C	D. Box NOT acceptable)
Name:	Paracorp Incorporated		
Office Address:	155 Office Plaza Drive, 1st Floor		
	Tallahassee		Florida 32301
	(City)		(Zip code)

#### 9. Registered agent's acceptance:

Having been named us 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.

Jose Gomez, 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.

#### OccuSign Envelope ID: BB76969E-AF91-41D2-B561-8E44D99B681F

#### A. DIRECTORS Name: \_\_\_\_\_ Jonathan Cherki □Chairman Name: \_\_\_\_ □ Chairman □Vice Chairman Address: 53 Beach Street □Vice Chairman Address: 6th Floor □ Director □ Director New York, NY 10013 President □President □Vice President \_\_\_\_\_ □Vice President □ Secretary □Treasurer □Secretary □Treasurer Other \_\_\_\_\_ Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Name: Arnaud Gouachon □ Chairman Name: □Chairman 53 Beach Street □ Vice Chairman Address: ☐ Vice Chairman Address: 6th Floor □ Director □Director New York, NY 10013 President □President □Vice President □Vice President □ Secretary ☐ Treasurer ☐ Secretary □Treasurer Chief Legal Office □Other \_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ ☐ Chairman Name: □ Chairman Name: \_\_\_\_\_ ☐ Vice Chairman Address: \_\_\_\_\_ ☐ 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.

arnaud Govachon -A121860E87762B1

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.

Arnaud Gouachon, Chief Legal Officer

# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CONTENT SQUARE, 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-SECOND DAY OF FEBRUARY, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONTENT SQUARE, INC." WAS INCORPORATED ON THE FIFTH DAY OF OCTOBER, A.D. 2016.

Authentication 202731593

Date 02-22-22