Division of Corporations

5/17/2021

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL IT

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one control

nail	Address:	 	 	 		_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MPLATFORM, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu





APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it appear					
State: MPLATFORM, LLC					
Enter new principal office address, if applicable:					
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)					
Enter new mailing address, if applicable: (Mailing address				1202 1	
MAY BE A POST OFFICE BOX)			: C. - <u>:</u>	=	-
2. The Florida document number of this limited li	lability company is: M18000002	O		2021 HAY 17 PH 4: 08	
3. Jurisdiction of its organization: Delaware		្រ	TS.	Ξ.	4
4. Date authorized to do business in Florida: 02/		7	<u> </u>	98	
SECTION II (5-9 complete only the applicable	changes)				
5 Non-name of the limited liability company	Choreograph LLC				
(mu	st contain "Limited Liability Co	mpany, " "L.L.C.,"	or "LL	.C.")	
(If name unavailable, enter alternate name adopte copy of the written consent of the managers or must contain "Limited Liability Company," "L.L.	anaging members adopting the a	business in Florida a Iternate name. The a	ind atta	ich a e name	
6. If amending the registered agent and/or registered agent and/or the new registered office:	red officer address on our record	ls, enter the name of	the neg	<u>w</u>	
Name of New Registered Agent:					
New Registered Office Address:				*****	
	Enter Florid	la Street Address			
		Florida		-) a me
	City	Zip	Code		
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered age the provisions of all statutes relative to the prope and accept the obligations of my position as regis document is being filed to merely reflect a chang- liability company has been notified in writing of	ent and agree to act in this capa ir and complete performance of i stered agent as provided for in C e in the registered office address	ny duties, and 1 am ; Thapter 605, F.S. Or	famuta: · if this	r wun :	

3. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change				
le/ Capacity	<u>Name</u>	Address Type	of Action	
			□Add	
			□Remov	
			□Add	
		SECRETALY OF STANLAHASSEE, F	20214AY 17 4H 4: 08H	
			□Remo	
-			□Remo	
			□Add	
aforemention	certificate, if required: no more than ned amendment(s), duly authenticated inder the law of which this entity is or	by the official having custody of records in the	□Remo	

Filing Fee: \$25.00

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "MPLATFORM, INC." FILED

A CERTIFICATE OF CONVERSION, CHANGING ITS NAME TO "MPLATFORM,

LLC", ON THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2017, AT 10:04

O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THE SAID "MPLATFORM, LLC"

FILED A CERTIFICATE OF MERGER, CHANGING ITS NAME TO "GROUPM DATAC"

& TECHNOLOGY LLC", ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 20200

AT 2:13 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF MERGER IS THE THIRTY-FIRST DAY, OF DECEMber, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THE SAID "GROUPM DATA &

TECHNOLOGY LLC" FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS

NAME TO "TEGRAL LLC", ON THE THIRTY-FIRST DAY OF MARCH, A.D.

2021, AT 4:53 O'CLOCK P.M.



Authentication: 203220616

Date: 05-17-21

6280538 8321 SR# 20211826850

<u>Delaware</u>

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The First State

AND I DO HEREBY FURTHER CERTIFY THE SAID "TEGRAL LLC" FILED

A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "CHOREOGRAPH

LLC", ON THE FIRST DAY OF APRIL, A.D. 2021, AT 5:23 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHOREOGRAPH

LLC", IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED

LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHOREOGRAPH LLC" WAS FORMED ON THE TWELFTH DAY OF JANUARY, A.D. 2017.



Authentication: 203220616

Date: 05-17-21

6280538 8321 SR# 20211826850