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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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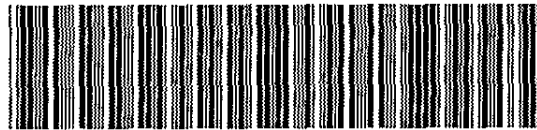
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C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

904-222-1092

CORPORATION(S) NAME

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Innovation Latin American Corp.

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☒ Foreign

☐ Amendment

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Thank you,

*Melanie
Strickland*

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: IMATION LATIN AMERICA CORP.
(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", 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:

RONALD L. HANSEN

(Name of Person)

IMATION LATIN AMERICA CORP.

(Firm/Company)

6205 BLUE LAGOON DRIVE, #600

(Address)

MIAMI, FL 33126

(City/State and Zip code)

For further information concerning this matter, please call:

DAVID W. JAMISON, JR.

(Name of Person)

at (305) 530-0050

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

**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. IMATION LATIN AMERICA CORP.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. DELAWARE 3. APPLIED FOR
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MARCH 24, 2003 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification" (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 6205 BLUE LAGOON DRIVE, #600, MIAMI, FL 33126
(Principal office address)
6205 BLUE LAGOON DRIVE, #600, MIAMI, FL 33126
(Current mailing address)
8. ENGAGE IN ANY LAWFUL ACT OR ACTIVITY PERMITTED UNDER FLORIDA LAW.
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: CT CORPORATION System
Office Address: 1200 SOUTH PINE ISLAND ROAD
PLANTATION, Florida 33324
(City) (Zip code)

10. 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.

Carrie Bryan Carrie Bryan, Special Asst. Secy.
(Registered agent's signature)

11. 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.

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CLERK OF THE COURT
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: RONALD L. HANSEN

Address: 6205 BLUE LAGOON DRIVE, #600
MIAMI, FL 33126

Vice Chairman: JOSEPH V. GOTE

Address: 6205 BLUE LAGOON DRIVE, #600
MIAMI, FL 33126

Director: SERGIO J. CASTILLO

Address: 6205 BLUE LAGOON DRIVE, #600
MIAMI, FL 33126

Director: JOHN L. SULLIVAN

Address: 6205 BLUE LAGOON DRIVE, #600
MIAMI, FL 33126

Director: PAUL R. ZELLER

Address: 6205 BLUE LAGOON DRIVE, #600
MIAMI, FL 33126

B. OFFICERS

President: RONALD L. HANSEN

Address: 6205 BLUE LAGOON DRIVE, #600
MIAMI, FL 33126

Assistant

Treasurer: SERGIO J. CASTILLO

Address: 6205 BLUE LAGOON DRIVE #600
MIAMI, FL 33126

Secretary: JOHN L. SULLIVAN

Address: 6205 BLUE LAGOON DRIVE, #600
MIAMI, FL 33126

Treasurer: GERALD P. HALBACH

Address: 6205 BLUE LAGOON DRIVE, #600, MIAMI, FL 33126

Assistant

Secretary: JOSEPH V. GOTE

Address: 6205 BLUE LAGOON DRIVE, #600, MIAMI, FL 33126

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *R. L. Hansen*

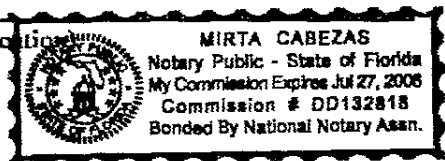
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. RONALD L. HANSEN

(Typed or printed name and capacity of person signing application)

Mirta Cabezas

3/24/03

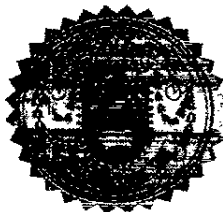


Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IMATION LATIN AMERICA CORP." 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 MARCH, A.D. 2003.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2325843

DATE: 03-24-03