

(Re	equestor's Name)
(Ad	ldress)
(Ad	idress)
(Cit	ty/State/Zip/Phone #)
(Bu	usiness Entity Name)
(Dc	ocument Number)
Certified Copies	_ Certificates of Status
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COVER	LETTER
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TO: Amendment Section Division of Corporations	of Corporation
•	Eg E
SUBJECT: Cogint. Inc. Name	of Corporation
	of Corporation
DOCUMENT NUMBER: F15000001219	
The enclosed Amendment and fee are subm	itted for filing.
Please return all correspondence concerning	this matter to the following:
Ryan McCarthy	
Name of Contact Person	
Fluent, Inc.	
Firm/Company	
33 Whitehall Street, 15 Fl	
Address	
New York, NY 10004	
City/State and Zip Code	
rmccarthy@fluentco.com	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this mat	ter, please call:
Ryan McCarthy	646 356-8468
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	nt:
S35.00 Filing Fee S43.75 Filing Fee & Certificate of Statu	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

PROFIT CORPORATION PLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO PPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F15000001219				
	(Document numbe	(Document number of corporation (if known)		
Cogint, Inc			Stra H.	
- <u></u>	(Name of corporation as it appears	s on the records of the Department of State)		
, Delaware		3. September 26, 2016		
(Incorporated under laws of)		(Date authorized to do busine	ss in Florida)	

SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? <u>April 13, 2018</u>

5. Fluent, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction) 8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction/under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Daniel Barsky

(Typed or printed name of person signing)

Secretary

(Title of person signing)

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FLUENT, 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 SIXTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLUENT, INC." WAS INCORPORATED ON THE TWENTIETH DAY OF MARCH, A.D. 2015.

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



Jeffrey W. Budiece, Secretary of Siate)

Authentication: 202190657 Date: 02-06-19

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SR# 20190666849 You may verify this certificate online at corp.delaware.gov/authver.shtml