

12/5/2017

**F700005471**Division of Corporations  
Electronic Filing Cover Sheet

**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.

(((H17000318513 3)))



H170003185133ABC\$

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

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

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512)418-6949  
Fax Number : (954)208-0845

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

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION  
ANALYTICS2GO, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

D SCOTT

DEC 6 2017

December 1, 2017

Florida Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

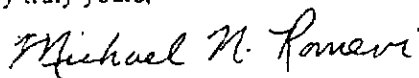
Re: Release of Name Analytics2Go, Inc.

Ladies and Gentlemen:

I am the sole incorporator of Analytics2Go, Inc., a Florida corporation formed on November 28, 2017. On December 1, 2017 I electronically filed Articles of Dissolution for Analytics2Go, Inc. I have no intention of revoking these Articles of Dissolution during the 120-day period, provided for under section 607.1404, Florida Statutes and would request the name Analytics2Go, Inc. be released as quickly as possible. I will instead be proceeding to register Analytics2Go, Inc., a Delaware corporation, as a foreign corporation qualified to transact business in the state of Florida, pursuant to section 607.1503, Florida Statutes.

Please do not hesitate to contact me by email at [mromeri@analytics2go.world](mailto:mromeri@analytics2go.world) with any questions. Thank you for your prompt attention to this matter.

Very truly yours,



Michael N. Romeri

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Analytics2Go, 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:

Clifford Esher

Name of Person

Foley Hoag LLP

Firm/Company

155 Seaport Boulevard

Address

Boston, MA 02210

City/State and Zip code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Clifford Esher

at (617) 832-1767

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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

# 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. Analytics2Go, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Delaware  
(State or country under the law of which it is incorporated)
3. \_\_\_\_\_  
(FEI number, if applicable)
4. October 28, 2017  
(Date of incorporation)
5. \_\_\_\_\_  
(Date of duration, if other than perpetual)
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 3745 Caledonia Lane, Sarasota, FL 34240  
(Principal office address)
- \_\_\_\_\_ (Current mailing address, if different)

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

Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(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.*

C T Corporation System

By: Jill Ziegman Jill Ziegman, 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. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Michael Romeri

Address: 3745 Caledonia Lane, Sarasota, FL 34240

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Michael Romeri

Address: 3745 Caledonia Lane, Sarasota, FL 34240

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Michael Romeri

Address: 3745 Caledonia Lane, Sarasota, FL 34240

Treasurer: Michael Romeri

Address: 3745 Caledonia Lane, Sarasota, FL 34240

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. Michael N. Romeri  
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. Michael Romeri - President  
(Typed or printed name and capacity of person signing application)

**ADDENDUM**  
**TO**  
**APPLICATION BY FOREIGN CORPORATION**  
**OF**  
**ANALYTICS2GO, INC..**

Officers:

Asst. Secretary	Peter Rosenblum	c/o Foley Hoag LLP, 155 Seaport Blvd Boston, MA 02210
Asst. Secretary	Mary Beth Romeri	3745 Caledonia Lane, Sarasota, FL 34240

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "ANALYTICS2GO, 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 FIFTH DAY OF DECEMBER, A.D. 2017.

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



6569255 8300

SR# 20177391106

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203688027

Date: 12-05-17