

F18000003392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

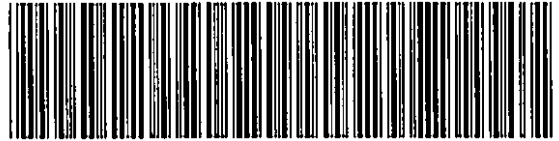
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
JUL 25 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
DataVoke, Inc.

**SUBJECT:** \_\_\_\_\_  
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:  
Phillip Pursifull

_____	Name of Person
DataVoke, Inc.	
_____	Firm/Company
2601 Fortune Circle East, Suite 301B	
_____	Address
Indianapolis, IN 46241	
_____	City/State and Zip code
pursifull@cagents.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Phillip Pursifull	317	271-6082
_____	at (_____) _____	
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:

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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.*

DataVoke, Inc.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

\_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  
Indiana 47-2526436

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
December 9, 2014

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (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)  
2601 Fortune Circle East, Suite 301B, Indianapolis, IN 46241

7. \_\_\_\_\_  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

Name: \_\_\_\_\_  
115 North Calhoun Street, Suite 4

Office Address: \_\_\_\_\_  
Tallahassee 32301  
\_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip code)

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**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.*

Anthony E. Trumbly, VP of COGENCY GLOBAL  
(Registered agent's signature) INC.

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.

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

**A. DIRECTORS**

Chairman: Robert Chew  
2601 Fortune Circle East, Suite 301B  
Address: Indianapolis, IN 46241

Vice Chairman: Thomas Sponsel  
251 N. Illinois St., Suite 450  
Address: Indianapolis, IN 46204

Director: Douglas Curry  
730 Essex St.  
Address: West Lafayette, IN 47906

Director: Larry Kranking  
170 Traylee Dr.  
Address: Wake Forest, NC 27587

**B. OFFICERS**

President: Timothy Howard  
2601 Fortune Circle East, Suite 301B, Indianapolis, IN 46241  
Address:

Vice President:

Address:

Secretary: Phillip Pursifull  
2601 Fortune Circle East, Suite 301B, Indianapolis, IN 46241  
Address:

Treasurer: Phillip Pursifull  
2601 Fortune Circle East, Suite 301B, Indianapolis, IN 46241  
Address:

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

12.   
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. Phillip Pursifull, Secretary  
(Typed or printed name and capacity of person signing application)

State of Indiana  
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

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TALLAHASSEE, FLORIDA

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

**DATAVOKE, INC.**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 09, 2014, and was in existence or authorized to transact business in the State of Indiana on July 11, 2018.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, July 11, 2018

*Connie Lawson*

CONNIE LAWSON  
SECRETARY OF STATE

2014121000250 / 2018668571

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on August 10, 2018.