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COVER LETTER

TO:	Registration Secti Division of Corpo					
	Praxidia US					
SUBJ	ECT:	Name of	Corporation	- must	include suffix	
		ivanic of	corporation	- must	metade surrix	
Dear S	Sir or Madam:					
"Certi		or "Certificate of	of Good Stan	iding'' a	nd check are sub	ct Business in Florida," omitted to register the
Please	return all correspon	ndence concernin	g this matter	to the f	ollowing:	
Heath	er Lewis					
			Name of	Person		
Praxid	ia US, Inc.					
			Firm/Com	pany		
1601 \	Vashington Avenue, S	Suite 400				
			Addre	:ss		
Miami	Beach, FL 33139					
			City/State a	nd Zip c	ode	
hlewis	@teleperformance.co	m				
		E-mail address:	(to be used f	or futur	e annual report	notification)
For fu	rther information co	oncerning this ma	tter, please o	all:		
Heather Lewis		786	437-	437-3294		
	Name of Person	a	t (Area Cod) e	Daytime Telep	hone Number
	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL	on orations enter Circle	:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
Enclos	sed is a check for th	e following amou	int:			
□ \$7	0.00 Filing Fee	■ \$78.75 Filing Certificate of			5 Filing Fee & ied Copy	S87.50 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. Praxidia US, 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) Delaware 2. (State or country under the law of which it is incorporated) (FEI number, if applicable) 02/02/2018 (Date of duration, if other than perpetual) (Date of incorporation) 10/01/2018 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1601 Washington Avenue, Suite 400, Miami Beach, FL 33139 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CT Corporation Name: 1200 South Pine Island Road Office Address: Plantation

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.

Diane Stout, Asst. Secy.

(Registered agent's signature)

(City)

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:

	1601 Washington Avenue, Suite 400, Miami Beach, FL 33139	
ess: _	<u> </u>	
- Chair	man:	
tor:	Alistair Niederer	
	1601 Washington Avenue, Suite 400, Miami Beach, FL 33139	
-	Leigh P. Ryan	
tor:	1601 Washington Avenue, Suite 400, Miami Beach, FL 33139	
essi _	1601 Washington Avenue, Suite 400, Mann Beach, F1, 33139	
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Presi	dent:	2:
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tary:	Leigh P. Ryan	•
	1601 Washington Avenue, Suite 400, Miami Beach, FL 33139	
	I necessary, you may attach an addendum to the application listing	
	Signature of Director or Officer	
	er or director signing this document (and who is listed in number 1 and that he or she is aware that false information submitted in a doc	
	gree felony as provided for in s.817.155, F.S.	same to the Department of State Constitution

Addendum to Application by Foreign Corporation for Authorization to Transact Business in Florida

Praxidia US, Inc. 1601 Washington Avenue Suite 400 Miami Beach, FL 33139

11. Name and Business Address of Officers and/or Directors:

B. OFFICERS

Chief Executive Officer: Paulo Righetti

1601 Washington Avenue, Suite 400, Miami Beach, FL 33139

Chief Financial Officer: Charles Klotz

1601 Washington Avenue, Suite 400, Miami Beach, FL 33139

Chief Sales and Marketing Officer: Alistair Niederer

1601 Washington Avenue, Suite 400, Miami Beach, FL 33139

18 OCT 17 PH 2: 10

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PRAXIDIA US, 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 TWELFTH DAY OF OCTOBER, A.D. 2018.

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

Authentication: 203599017

Date: 10-12-18