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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

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an	nual	report	: mailin	gs.	Enter	only o	ne	email	add	ress	ple	ase.	**** ***

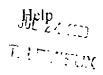
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## FOREIGN PROFIT/NONPROFIT CORPORATION MANAGEMENT ONE LTD INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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77

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Enter name of con Inc.," "Co.," "Cor	poration; must include "INC p." "Inc," "Co," or "Corp.")	ORPORATED," "C	OMPANY," "CORPORATION.	<del>,,</del>
Management O	ne Retail Analytics Inc.			
(It name unavailab	le in Florida, enter alternate	corporate name adol	sted for the purpose of transacting	g business in Florida)
IL		3		····
(State or country	under the law of which it is	incorporated)	(FEI number, if ap	plicable)
02/11/1998		5	(Date of duration, if other	
(Date of 07/09/2020	f incorporation)		(Date of duration, if other	than perpetual)
2100 E Speedway	(SEE SECTIONS 6 Blvd, #41565, Tucson, Ariz	07,1501 & 607,1502 cona 85717	orida, if prior to registration), F.S., to determine penalty liabil	ity)
<u> </u>		(Principal	office address)	
		(Compar mailing)	address, if different)	
		(Carem manage	· · · · · · · · · · · · · · · · · · ·	
Name and stree	t address of Florida regist	tered agent: (P.O.	Box <u>NOT</u> acceptable)	<b>*</b>
C T Corporation System			g	
			7	
Name:	1200 South Pinc Island R	nad	<u></u>	ii
Name:	1200 South Pine Island R	toad		2
Name:	1200. South Pine Island R			ij w l
				w I
Name: ffice Address:	Plantation, (City	v)	, Florida	A

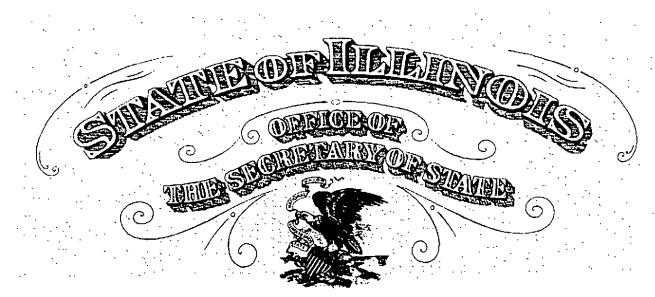
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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

A. DIRE	CTORS
Chairman:	
Address: _	
_	
Vice Chair	nvan:
Address: _	
Ditector:	Marc Weiss
2	2100 E Speedway Blvd; #41565
	Tucson, Arizona 85717
Director:	
Address:	
B. OFF	Mary Wales
President	2100 F C 1 Db.1 441565
Address:	T 4 95717
	sident:
Address:	
	Carol Weiss
	2100 E Speedway Blvd, #41565, Tucson, Arizona 85717
Address:	Marc Weiss
Treasure	2100 E Speedway Blvd, #41565, Tucson, Arizona 85717
Address:	If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12.	
are true	Signature of Director or Officer icer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes degree felony as provided for in s.817.155, F.S.
13	(Typed or printed name and capacity of person signing application)

File Number

5980-217-8



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

## Business Services. I certify that

MANAGEMENT ONE LTD., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON FEBRUARY 11, 1998, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of

the State of Illinois, this 17TH

day of

ЛULY

A.D.

2020

Authentication #; 2019902708 verifiable until 07/17/2021
Authenticate at. http://www.cyberdriveillinois.com

SECRETARY OF STATE