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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

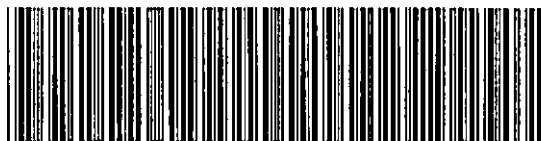
Certified Copies _____

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TALLAHASSEE, FLORIDA
AUG 13 PM 3:15

FILED

US
8/15/20





FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 1, 2020

DAISY CASTRO
260 PEACHTREE ST.
STE:2700
ATLANTA, GA 30303

SUBJECT: SB MARKETING ANALYTICS, INC.
Ref. Number: W20000083106

We have received your document for SB MARKETING ANALYTICS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott
Document Specialist II

Letter Number: 820A00014436

RECEIVED
AUG 13 2020

SCHULTEN WARD TURNER & WEISS



ATTORNEYS AT LAW

A LIMITED LIABILITY PARTNERSHIP

July 14, 2020

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, Florida 32314

Re: SB Marketing Analytics, Inc.
Our File No.: 5169.002

Dear Madam or Sir:

Enclosed please find the Application by Foreign Corporation for Authorization to Transact Business in Florida. Also enclosed are the Certificate of Existence and a check in the amount of \$70.00 for the registration fee.

Thank you for your assistance.

Very truly yours,

Daisy Castro

/dc
Enclosures.

FILED
2020 AUG 13 PM 3:15
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SB Marketing Analytics, 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:

Daisy Castro

Name of Person	Firm/Company	Address	City/State and Zip code	E-mail address: (to be used for future annual report notification)
Schulten Ward Turner & Weiss	260 Peachtree St. Ste. 2700	Atlanta, GA 30303	d.castro@swtwlaw.com	

2020 AUG 13 PM 3:15
FBI - TAMPA

For further information concerning this matter, please call:

Name of Person	Area Code	Daytime Telephone Number
Daisy Castro	404	688-6800 or 678-409-6553

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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. SB Marketing Analytics, Inc.
(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)

2. Delaware 3. 84-4594701
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02-04-2020 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)

7. 541 N. Fairbanks Ct. Suite 220
(Principal office street address)

Chicago, IL 60611
(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

April Miller 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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: Tom E. Arcuragi

☐ Vice Chairman Address: 1063 Via Alta

☐ Director Burbank, CA 91501

☒ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Tom E. Arcuragi

☐ Vice Chairman Address: 1063 Via Alta

☒ Director Burbank, CA 91501

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Matthew Sauer

☐ Vice Chairman Address: 2018 N Orleans

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☒ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Matthew Sauer

☐ Vice Chairman Address: 2018 N Orleans

☐ Director Chicago, IL 60614

☐ President _____

☒ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: Matthew Sauer

☐ Vice Chairman Address: 2018 N Orleans

☒ Director Chicago, IL 60614

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

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VICTORIA

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. *Tom E. Arcuragi* 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. TITOMAS E. ARCURAGI, President
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SB MARKETING ANALYTICS 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 EIGHTH DAY OF JULY, A.D. 2020.

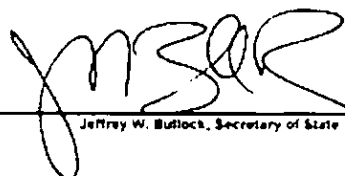
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DELAWARE



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SR# 20206130145

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


Jeffrey W. Bullock, Secretary of State

Authentication: 203249568

Date: 07-08-20