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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT: ConData Global, Inc.	
		ation - must include suffix
Dear S	ir or Madam:	
"Certif	closed "Application by Foreign Corporation icate of Existence," or "Certificate of Good eferenced foreign corporation to transact bu	for Authorization to Transact Business in Florida," Standing" and check are submitted to register the siness in Florida.
Please	return all correspondence concerning this ma	atter to the following:
	Name	e of Person
	Firm/C	Company
	A	ddress
	City/Sta	te and Zip code
	E-mail address: (to be use	ed for future annual report notification)
For furth	ner information concerning this matter, pleas	·
	at ()
-	Name of Person Area C	ode Daytime Telephone Number
I I 7 2	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 1415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Picase ma	is a check for the following amount: ke check payable to: FLORIDA DEPARTMEN Filing Fee	NT OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy 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. ConData Glob (Enter name of "Inc.," "Co.," "	corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"		
(If name unava	ilable in Florida, enter alternate corporate name	adopted for the purpose of transacting business	in Florida)	
2. <u>DE</u>	3	83-1741829	•	
(State or country under the law of which it is incorpo		orated) (FEI number, if applicable)		
(Dat	e of incorporation)	(Date of duration, if other than perpetual)		
/		e street address)		
Name:	Current mailing et address of Florida registered agent: (P.O. Paracorp Incorporated 155 Office Plaza Drive, 1st Floor	Box NOT acceptable)	2020 NOV -	T
Office Address:	Tallahassee	, Florida $\frac{32301}{77}$	章 []	7
further agree to co	(City) nt's acceptance; ed as registered agent and to accept service application, I hereby accept the appointme, mply with the provisions of all statutes rela with and accept the obligations of my posit	nt as registered agent and agree to act in t		ブ :s,

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.

(Registered agent's signature)

^{11.} For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

DocuSign Envelope ID: 78EC46D2-4902-4AE0-89A1-8544B577CEDA

A. DIRECTORS			
Chairman	Name;	□ Chairman	Name:
□Vice Chairman	9830 190th St Address:	_ □Vice Chairman	Address:
□Director	Suite M	6 7.5.	Suite 4W
President	Mokena	_ President	Chicago
□Vice President	IL 60448	_ □ Vice President	IL 60661
☐ Secretary	☐ Treasurer	■ Secretary	□Treasurer
□Other	□ Other	□ Other	Other
□ Chairman	Name:	☐ Chairman	Name:
	Address:		Address:
□ Director		□Director	Audicss.
□President		_	
□Vice President			
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	
□ Chairman	Name	CO.	
	Name:		Name:
ΩD' .			Address:
President		Director	
_			
☐ Secretary	☐Treasurer	□Vice President	
□Other		☐Secretary ☐Other	☐Treasurer
Important Notice: Usindividuals may be ac Docusionad by:	e an attachment to report more than six (6). The ided to the index when filing your Florida Department.	e attachment will be imaged f artment of State Annual Repo	for reporting numoses only Non-indexed
22080876501A4FF			
The officer or director she is aware that false s.817.155, F.S.	r signing this document (and who is listed in no information submitted in a document to the De	umber 11 above) affirms that epartment of State constitutes	the facts stated herein are true and that he or a third degree felony as provided for in
13. David B Newbo	erry, President		

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CONDATA GLOBAL, 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 FOURTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONDATA GLOBAL,

INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF AUGUST, A.D.

2018.

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

Authentication: 204001381

Date: 11-04-20