

F21000001099

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

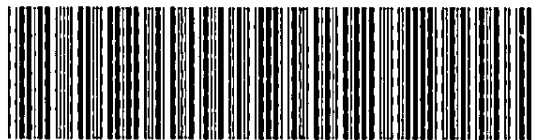
\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

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W21000024990  
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Office Use Only



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# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 02/17/2021

Acc#120160000072

*en: c SW*

Name:	LiveRamp, Inc.
Document #:	
Order #:	13465857

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 978.75

Thank you!

**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. Liveramp, 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)  
Delaware

2. \_\_\_\_\_ 3. 20-2888396  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/31/2005 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. 04/01/2015  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

225 Bush ST, FL 17, San Francisco, CA 94104  
7. \_\_\_\_\_  
(Principal office address)

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

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.*

C T Corporation System

By: Michael Seraphin, Asst. 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. Names and business addresses of officers and/or directors: *SEE ATTACHMENT*

**A. DIRECTORS**

Chairman: Scott E. Howe ✓

Address: 225 Bush ST, FL 17, San Francisco, CA 94104

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Jerry C. Jones ✓

Address: 225 Bush ST, FL 17, San Francisco, CA 94104

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Warren Jenson ✓

Address: 225 Bush ST, FL 17, San Francisco, CA 94104

Vice President: Markus Dinkel ✓

Address: 225 Bush ST, FL 17, San Francisco, CA 94104

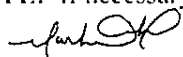
Secretary: Catherine Hughes ✓

Address: 301 Main Street, Little Rock, AR 72201

Treasurer: Jack (Jay) W. McCrary ✓

Address: 301 Main Street, Little Rock, AR 72201

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



Signature of Director or Officer

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 first degree felony as provided for in s.817.155, F.S.

Markus Dinkel, Assistant Treasurer & Vice President

(Typed or printed name and capacity of person signing application)

**11: Additional names and business addresses of officers and/or directors:**

First Name: Scott  
Middle Name: E.  
Last Name: Howe  
Title: Chief Executive Officer  
Address: 225 Bush Street, Fl 17  
City: San Francisco  
State: CA  
Zip Code: 94104

First Name: Anneka  
Middle Name: R.  
Last Name: Gupta  
Title: President and Head of Products and Platforms  
Address: 225 Bush Street, Fl 17  
City: San Francisco  
State: CA  
Zip Code: 94104

First Name: Lauren  
Middle Name: R.  
Last Name: Dillard  
Title: Chief Communications Officer  
Address: 225 Bush Street, Fl 17  
City: San Francisco  
State: CA  
Zip Code: 94104

First Name: Brandon  
Middle Name:  
Last Name: Sammut  
Title: Chief People & Culture Officer  
Address: 225 Bush Street, Fl 17  
City: San Francisco  
State: CA  
Zip Code: 94104

First Name: David  
Middle Name:  
Last Name: Eisenberg  
Title: SVP–Strategy & Corporate Development  
Address: 225 Bush Street, Fl 17  
City: San Francisco  
State: CA  
Zip Code: 94104

First Name: Christopher  
Middle Name:  
Last Name: Garber  
Title: SVP–Finance & Operations  
Address: 225 Bush Street, Fl 17  
City: San Francisco  
State: CA  
Zip Code: 94104

First Name: James  
Middle Name: F.  
Last Name: Arra  
Title: President and Chief Commercial Officer  
Address: 225 Bush Street, Fl 17  
City: San Francisco  
State: CA  
Zip Code: 94104

First Name: Jerry  
Middle Name: C.  
Last Name: Jones  
Title: EVP, Chief Ethics & Legal Officer & Asst Secretary  
Address: 301 Main Street  
City: Little Rock  
State: AR  
Zip Code: 72201

First Name: Amy  
Middle Name: L.  
Last Name: Stewart  
Title: SVP, General Counsel and Global Chief Data Ethics Officer  
Address: 301 Main Street  
City: Little Rock  
State: AR  
Zip Code: 72201

First Name: Arthur  
Middle Name: G.

Last Name: Kellam  
Title: SVP-Chief Accounting Officer  
Address: 301 Main Street  
City: Little Rock  
State: AR  
Zip Code: 72201

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIVERAMP, 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 TWENTY-SIXTH DAY OF JANUARY, A.D. 2021.

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

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



3948680 8300

SR# 20210234104

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202376381

Date: 01-26-21





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 22, 2021

C T CORP

**CORRECTED**  
**Please Allow For**  
**Same File Date**

SUBJECT: LIVERRAMP, INC.  
Ref. Number: W21000024990

We have received your document for LIVERRAMP, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$900.00.

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.

Sharon D Franklin  
Regulatory Specialist II

Letter Number: 621A00003946

*Sent back 2/21/21*