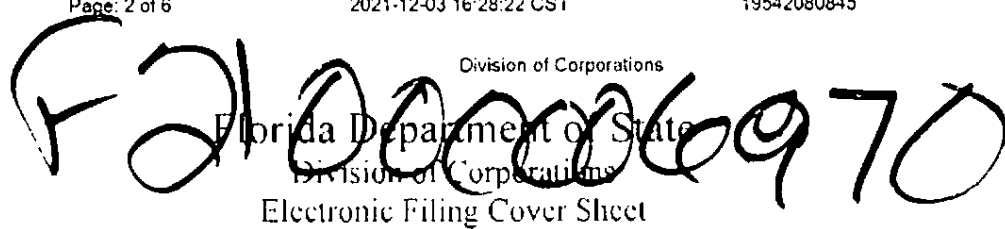


12/3/21, 4:27 PM



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000442430 3)))



H210004424303ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)288-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
CODAT INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

2021 DEC -6 AM 10:31

AUTOMATICALLY GENERATED

2021 DEC -6 AM 11:48
RECEIVED
FLORIDA DEPARTMENT OF STATE

Electronic Filing Menu

Corporate Filing Menu

Help

S. HAWKES**DEC - 2021**

DocuSign Envelope ID: 99A8AE4E-1C7B-4A92-A3F9-556CC7655788

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.*

CODAT 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)

2. Delaware 3. 35-2682506
(State or country under the law of which it is incorporated) (FEI number, if applicable)
01/08/2020

4. _____ 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)

30 Ink Rooms, 28 Easton Street, London, United Kingdom WC1X 0BE
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)

2021 DEC -6 AM 11:48
 DEPARTMENT OF STATE
 TALLAHASSEE, FL
 FILED

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: /s/ Kathryn Widdoes
(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.

DocuSign Envelope ID: 99A8AE4E-1C7B-1A92-A3F9-556CC7655788

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Peter Lord
20 Ink Rooms, 28 Easton Street, London, United Kingdom WC1X 0BE

Address: _____

Director: David Hoare
20 Ink Rooms, 28 Easton Street, London, United Kingdom WC1X 0BE

Address: _____

B. OFFICERSPresident: Peter Lord
20 Ink Rooms, 28 Easton Street, London, United Kingdom WC1X 0BE

Address: _____

Vice President: _____

Address: _____

Secretary: Alexander Cardona
28 Ink rooms, 28 Easton Street, London, United Kingdom WC1X 0BE

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.12.  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. Alex Cardona, Secretary

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

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACT BUSINESS IN FLORIDA**

ADDENDUM

CODAT INC.

11.A Directors

Director: Alexander Cardona, 20 Ink Rooms, 28 Easton Street, London, United
Kingdom WC1X 0BE

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CODAT 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 THIRD DAY OF DECEMBER, 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.



7789483 8300

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

Authentication: 204859288