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S. ROBERTS
DEC 15 2022

COVER LETTER

TO: Registration Division of 0	Section Corporations				
SUBJECT: DATA	AGALAXY INC.			_	
Sobject.	Name of	corporation - n	nust include suffix		
Dear Sir or Madam:					
"Certificate of Exist	ication by Foreign Corpence," or "Certificate of reign corporation to tran	Good Standin	g" and check are subm	Business in Florida," itted to register the	
Please return all con	respondence concerning	this matter to	the following:		
EMILIE COTE					
		Name of Per	son		
DATAGALAXY INC	·				
 -		Firm/Compa	ny		
185 ALEWIFE BROO	OK PARKWAY, SUITE 2	10			
		Address			
CAMBRIDGE, MA 0	02138				
	(City/State and	Zip code		
EMILIE.COTE@ZEI			_		
	E-mail address: (to be used for	future annual report no	tification)	
For further informat	tion concerning this mat	ter, please call	:		
EMILIE COTE	a	ı (⁶¹⁷	576-2005		
Name of Pe		Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Se Division of Cor P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check Please make check pa \$70.00 Filing Fe	for the following amousyable to: FLORIDA DEFine	PARTMENT OF Fee & \square S	F STATE 678.75 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.

		opted for the purpose of transacti		n Florida)
DELAWARE	3. 8	8-3981323 (FEI number, if a		
(State or country	under the law of which it is incorporated)	(FEI number, if a	pplicable)	
08/30/2022 5.		(Date of duration, if other than perpetual)		
(Date	of incorporation)	(Date of duration, if other than perpetual)		
85 ALEWIFE B	(SEE SECTIONS 607.1501 & 607.1501 ROOK PARKWAY, SUITE 210, Con bridge)		lity)	u,
	(Principal office	e <u>street</u> address)		<i>0</i> ×2
_ _	(Current mailing	address, if different)		or DE
Name and stree	t address of Florida registered agent: (P.O.	Box NOT acceptable)	t	i CD
Name:	C T CORPORATION SYSTEM			2
fice Address:	1200 SOUTH PINE ISLAND ROAD		÷	AH 11: 50
mee Madress.	PLANTATION	, Florida 33324(Zip code)		
	(City)	(Zip code)		

^{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: LAZHAR SELLAMI	□ Chairman	Name: SEBASTIEN THOMAS
□Vice Chairman	Address:	□Vice Chairman	Address: 185 ALEWIFE BROOK PKWY
Director	SUITE 210	■ Director	SUITE 210
■ President	CAMBRIDGE, MA 02138	President	CAMBRIDGE, MA 02138
□Vice President		□Vice President	
■ Secretary	□Treasurer	Secretary	■ Treasurer
Other	Other	Other	□Other
□ Director □ President □ Vice President □ Secretary	ALEXANDRA SUHAS Name: 185 ALEWIFE BROOK PKY Address: SUITE 210 CAMBRIDGE, MA 02138 [] Treasurer ANTE S. [] Other	☐Chairman ☐Vice Chairman ☐Director ☐President ☐Vice President ☐Secretary ☐Other	Treasurer
□Chairman	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	
□President		□President	
□Vice President		□Vice President	
□Secretary	☐Treasurer	Secretary	☐ Treasurer
□Other	Other	□Other	□ Other
individuals may b	Use an attachment to report more than six (6). The be added to the index when filing your Florida Depa Signature of Director signing this document (and who is listed in nu false information submitted in a document to the De	tor or Officer	that the facts stated herein are true and that he c
13. LAZHAR S	SELLAMI, PRESIDENT	iia_anli-si	00)
	(Typed or printed name and capacity of	berzon zikuruk abbireatit	OH;

HL S

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DATAGALAXY 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-THIRD DAY OF NOVEMBER, A.D. 2022.



Authentication: 204934055

Date: 11-23-22