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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE: 740393 4320744
AUTHORIZATION: Spelle le ma
COST LIMIT : \$ 125.00
ORDER DATE : June 13, 2022
ORDER TIME : 8:31 AM
ORDER NO. : 740393-005
CUSTOMER NO: 4320744
DOMESTIC FILING
NAME: RATTO SOFTWARE LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Alexxis Weiland - EXT.
EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ility Company is:			
RATTO SOFTW:	ARE LLC			
	onatin the words "Limited	Liability Company.	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stree	t address of the principal c	office of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
505 Park Avenue, 8th Floor		505	505 Park Avenue, 8th Floor	
New York, New York 10022		New	New York, New York 10022	
				
another business entity with a The name and the Florida stre	_			
	Corporation Service			
	Corporation Service	Company Name		
	1201 Hays Street	Name		55)
		Name	cceptable)	2 673
	1201 Hays Street Florida street addres Tallahassee	Name s (P.O. Box <u>NOT</u> ac FL	cceptable) ;.	
	1201 Hays Street Florida street addres	Name s (P.O. Box <u>NOT</u> ac	·	

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: "AMBR" - Authorized Member Name and Address: "MGR" = Manager MGR Bernardo de Almeida Braga Ratto 505 Park Avenue, 8th Floor New York, New York 10022 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

I am aware that any 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.

Bernardo de Almeida Braga Ratto, Authorized Representative Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certifled Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)