Elerica Division of Corporations

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Business Cover Sheet

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.

(((H14000287436 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : NASCN, YEAGER, GERSON, WHITE & LIOCE, P.A.

Account Number : 073222003555 Phone : (561)686-3307 Fax Number : (561)471-0894

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Floring Linda d Linksity Company

#### Foreign Limited Liability Company Interactive Data, LLC

Certificate of Status	1
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December 15, 2014

FLORIDA DEPARTMENT OF STATE

NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.

SUBJECT: INTERACTIVE DATA, LLC

REF: W14000074255

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H14000287436 Letter Number: 614A00026382 2014 DEC 15 AM 9: 55

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INFORMATION SERVICES

5

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: L Interactive Data, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LIC.") Interactive Data GA, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "L.L.C,") <sub>2.</sub> Georgia (Jurisdiction under the law of which foreign limited (lability company is organized) (Date lirst transacted business in Florida, if prior to registration.)
(See sections 605,0904 & 605,0903, F.S. to determine penalty liability) 2650 North Military Trail, Suite 300 Boca Raton, FL 33431 (Street Address of Principal Office) 6, 2650 North Military Trail, Suite 300 Boca Raton, FL 33431 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: The Best One, Inc., a Florida corporation, Derek Dubner, CEO 2650 North Military Trail, Suite 300 Boca Raton, FL 33431 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translato must be submitted) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the ponetics of perjury that the ferromagnetic in the constitutes are affirmation under the ponetics of perjury that the ferromagnetic in the constitutes are affirmation under the ponetics of perjury that the ferromagnetic in the constitutes are affirmation under the ponetics of perjury that the ferromagnetic in the constitution of the we aware that any false information aubinisted in a document to the Department of State constitutes a third degree felony as provided for in a

Derek Dubner, CEO of the Best One, Inc.

Typed or printed name of signee

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.	
The name of the Limited Liability Company is:     Interactive Data, LLC	
If unavailable, the afternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Michael D. Harris	
(Name)	
1645 Palm Beach Lakes Blvd., Ste 1200	
Piorida Street Address (P.O. Box NOT ACCEPTABLE)	
West Palm Beach FL 33401	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as a registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Floridal Statutes.	
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	
\$ 30.00 Certified Copy (optional)	

5.00 Certificate of Status (optional)

### STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0146617
DATE INC/AUTH/FILED : October 03, 2001
JURISDICTION : Georgia
PRINT DATE : December 12, 2014

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

## INTERACTIVE DATA, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Brian P. Kemp Secretary of State

Tracking #: cBXMXb9P