# M15000008156

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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K SALY MAY 1 5 2019

	,
CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500	
ACCOUNT N	р. : I2000000195
REFEREN	ICE : 7604 21 1 8153185
AUTHORIZATI	DN : Sprelle par
COST LIM	1T : \$ 25.00
ORDER DATE : May 13, 2019	
ORDER TIME : 12:46 PM	
ORDER NO. : 760411-030	
CUSTOMER NO: 8153185	
FOREIG	N FILIN <u>GS</u>
NAME: KROLL ONTR	ACK, LLC
CORPORATE LIMITED PARTNERSHIP	
XX LIMITED LIABILITY COM	IPANY
XXXX AMENDMENT	
PLEASE RETURN THE FOLLOWING	AS PROOF OF FILING:
CERTIFIED COPY   XX PLAIN STAMPED COPY   CERTIFICATE OF GOOD	STANDING
CONTACT PERSON: Lydia Cohe	
	EXAMINER:

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		ERLETTER
	TO: Registration Section Division of Corporations	
	SUBJECT: Kroll Ontrack, LLC	
	Name of Foreign	Limited Liability Company
	Dear Sir or Madam:	
	The enclosed application, certificate and fee(s) a	re submitted for filing.
	Please return all correspondence concerning this	matter to the following:
	ANDY SOUTHAM	
	Name of Person	
ł	<b></b>	
	KLDISCOVERY	
	Firm/Company	
	25 FARRING DON STREET, LONDO	N
	Address	
	EC4A 4AB	
	City/State and Zip Code	
	andrew. Southan @ kldisco.	~
	E-mail address: (to be used for future annual re	port notification)
$\epsilon$	For further information concerning this matter, pl	ease call:
,	ANOY SOUTHAM	1 (44 )(0) 7917 235015
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following amount: \$25 Filing Fee \$\$30 Filing Fee & Certificate of Status CR2E055 (9/15)	S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy
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#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)	<u>,                                    </u>
1. Name of limited liability Company as it appears on the records of the Florida Department of State: Kroll Ontrack, LLC	19 HA 14
Enter new principal office address, if applicable:	FD
(Principal office address MUST BE A STREET ADDRESS)	FILED 3: 44
Enter new mailing address, if applicable: ( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u> )	
2. The Florida document number of this limited liability company is: M15000008156	
3. Jurisdiction of its organization: Minnesota	
4. Date authorized to do business in Florida: 10/12/2015	
SECTION II (5-9 complete only the applicable changes)	
5. New name of the limited liability company: KLDiscovery Ontrack, LLC (must contain "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Fiorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")	
6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	:
Enter Florida Street Address	
City Zin Code	
New Registered Agent's Signature, if changing Registered Agent: 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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.	
If Changing Registered Agent, Signature of New Registered Agent	

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7. If the amendment changes the jurisdiction of drganization, indicate new jurisdiction:

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Title/ Capacity	Name	Address	Type of Action
			Linda 5
			HAN .
			Remove
			PH
			Remove PH
			Remove
			Add
			Remove
·····			Add
			Remove
		·····	Add
			Remove
atorementioned ame	noment(s), duly authenticat	n 90 days ald, evidencing the of by the official having custody of records in the	
Jurisciction under the	a law of which this entity is	organized.	
		e of the authorized representative	
	Andrew Sou		
	Typed or	printed name of signee	
	Fî	ing Fee: \$25.00 4	

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:



#### Office of the Minnesota Secretary of State

Minnesota Limited Liability Company | Amendment to Articles of Organization

Minnesota Statutes, Chapter 322C

#### Read the instructions before completing this form. Filing Fee: S55 for expedited service in-person and online filings, S35 if submitted by mail

1. List the name of this company currently on file with the Office of the Minnesota Secretary of State: (Required)

Kroll Ontrack, LLC

2. The articles of organization for this Limited Liability Company are amended pursuant to Chapter 322C.

### AMENDMENT OPTIONS: Complete as many amendment options as apply. Complete an option only if you are changing the information related to that option.

3. The company name is changed to: KLDiscovery Ontrack, LLC				
4. The registered office address is changed to:		MN		
Street Address (A post office box by itself is not acceptable)	City	State	Zip Code	
5. The registered agent is changed to:			AY IL PH	
6. The business mailing address has changed to:			3: 44 17.7E	C
Address	City	State	Zip Code	

7. The articles of organization are otherwise amended as follows:

8. I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject-to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

Signature of Authorized Person or Authorized Agent

01/25/2019

Date





Office of the Minnesota	Secretary of State
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Minnesota Limited Liability Company | Amendment to Articles of Organization Minnesota Statutes, Chapter 322C



Email Address for Official Notices

Enter an email address to which the Secretary of State can forward official notices required by law and other notices:

andrew.southam@kldiscovery.com

Check here to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.

List a name and daytime phone number of a person who can be contacted about this form:

Eleanor Romanelli	202-637-2200
Contact Name	Phone Number

## Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must register with the MN Dept. of Agriculture's Corporate Farm Program.

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed? Yes  $\square$  No $\boxtimes$ 

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#### Work Item 1064481100040 Original File Number 837496100082

STATE OF MINNESOTA OFFICE OF THE SECRETARY OF STATE FILED 01/23/2019 11:59 PM

Oteve Dimm

Steve Simon Secretary of State

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