Division of Corpo Lis 1 500000000 PR1 of 2

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205-8842

Fax Number

: (850)878-5368

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

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|-----|----|---|----|----|----|---|---|---|

Foreign Limited Liability Company Courtroom Connect, LLC

| Certificate of Status | 0 |
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Corporate Filing Menu

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12/28/2015

IV. Guilleun

DEC-2 9 2015



Courtroom Connect, Inc. 200 Ashford Center N, Suite 350 Dunwoody, GA 30338

To whom it may concern:

Courtroom Connect, Inc. hereby consents to the use of its name by Courtroom Connect, LLC.

Dated: December 23, 2015

Courtroom Connect, Inc.

Name: Andrew Feinberg

Title: Chief Executive Officer

COVER LETTER

| UBJECT: | Courtroom Connec | t, LLC | | | | | |
|----------------------------|---|---|------------------------------------|--|--|--|--|
| <i></i> | • • • • • • • • • • • • • • • • • • • | Name of | Limited Liability (| nited Liability Company | | | |
| | | | | | insact Business in Florida," Certificat y company to transact business in Flor | | |
| lcase return a | all correspondence | concerning this matter to the | following: | | | | |
| | Joseph Gargan | ı | | | | | |
| | ************************************** | N | ame of Person | | The state of the s | | |
| | Courtroom Co | nnect, LLC | | | | | |
| | | Firm/Company | | | | | |
| | 1747 Pennsylv | ania Ave., NW, Suite 450 | | | | | |
| | | | Address | | | | |
| | Washington, D | C 20006 | | | | | |
| | | City/S | tate and Zip Code | | | | |
| | jgargan@thepen | sioncompany.com | | | | | |
| | | E-mail address: (to be use | I for future annual | report not | ification) | | |
| r further info | ormation concerning | g this matter, please call: | | | | | |
| Joseph Gargan | | m 703 | 80 | 0-4265 | | | |
| | Name | of Contact Person | Area Code | | time Telephone Number | | |
| Divisi Regisi P.O. I | LING ADDRESS: ion of Corporations tration Section Box 6327 nassee, FL 32314 | | - | Division of Registratic Clifton Bia 2661 Exe | CADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301 | | |
| | heck for the follow 25.00 Filing Fee | ring amount: \$\Boxed{\textbf{B}} \\$130.00 \text{ Filing Fee & Certificate of Status} | □ \$155,00 Filin Certified Copy | ıg Fee & | ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy | | |

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| , Courtroom Connect, Li | CC | , | |
|---|--|--|--|
| (Name of Fore | ign Limited Liability Company; mus | it include "Limited Liability Company," "L.C.," or "LLC." | |
| Liability Company," "L.L.C," | ternate name adopted for the purpose "or "LLC.") | of transacting business in Florida. The alternate name must | include "Limited |
| 2. Delaware | | 3 | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | (FEI number, if applicable) | |
| 4. October 29, 2015 | | | |
| | (Date first transacted husines (See sections 605,0904 & 605,0 | ss in Florida, if prior to registration.) 1905, F.S. to determine penalty liability) | |
| 5. 1209 Orange Street | ······································ | | |
| Wilmington, DE 19801 | | | r-2 |
| 10.00 | (Street Address of P | rincipal Office) | |
| 6. 1747 Pennsylvania Ave | ., NW, Suite 450 | | |
| Washington, DC 2000 | 6 | | |
| | (Mailing A | (ddress) | SS 19 |
| 7. Name and street addres | g of Florida registered agent: (P.C | O. Box NOT acceptable) | |
| Name: | C T Corporation System | | |
| Office Address: | 1200 South Pine Island Road | | |
| | Plantation | , Florida 33324 (Zip code) | |
| Registered agent's accept | (City) | (Zip code) | |
| Having been named as re lesignated in this applicat a complywith the provision accept the obligations of n | gistered agent and to accept services, I hereby accept the appointments of all statutes relative to the pay position as registered agent. C T Corporation Systems | | ity. I further agree |
| | (Registe | red agent's signature) sistant Secretary | |
| The name title or some | aites and address afthe wassauls) - | who has/have authority to manage is/are: | |
| s. The name, unle of capa Joseph Gargan, Chief Exe | • | who has/have addiority to manage is/are: | |
| 1747 Pennsylvania Ave., 1 | | | _ |
| Washington, DC 20006 | 4 W , 5011E 450 | | _ |
| Washington, DC 20000 | | | |
| Attached is a certificate or carried or | of which it is organized. (If the cer bmitted) | s old, duly authenticated by the official having custody rtificate is in a foreign language, a translation of the cer | of records in the tificate under oath |
| | Signature o | Lang- | |
| | | • | |
| his document is executed ubmitted in a document to | in accordance with section 605.02 the Department of State constitute | 203 (1) (b), Florida Statutes. I am aware that any false in es a third degree felony as provided for in s.817.155, F. | ıformation S. |
| | Joseph Gargan | | |
| • | Typed or no | inted name of signee | |

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "COURTROOM CONNECT, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 10581676

Date: 12-09-15

5858528 8300 SR# 20151275953

You may verify this certificate online at corp.delaware.gov/authver.shtml