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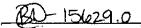
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Foreign Limited Liability Company CYBER RISK MANAGEMENT, LLC

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Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$793.75

MAY 1 9 2016

S. YOUNG

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

IN COMPLIANCE WITH SECTION 605,0902, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RESISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. CYBER RISK MA	ANAGEMENT, LLC	"Limited Hability Company," "L.L.C.," or "LLC.	-	
(If name unavailable, enter at Liability Company," 'L.L.C.'	tornate name adopted for the purpose of transi " or "LLC.")	eding business in Florida. The alternate name ma	nt include "Limited	
2 DELAWARE	3	46.2641539		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)		
4. 1/(//5	(O			
1 '	(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S.	. to determine penalty liability)		
5. 201 E. KENNED	Y BLVD., SUITE 1750			
TAMPA, FL 336	(Sirces Address of Principal C			
∠ 201 E. KENNED	Y BLVD., SUITE 1750	лікаў		
- W-2-411 (
TAMPA, FL 336	(Muiling Address)		of AL	
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	TAY A	
Name:	Capitol Corporate Services,	fnc.	- in	
Office Address:	155 Office Plaza Dr Ste A		16 MAY 18 AMI	
. Office Authors.	Tallahassee	, Florida 32301	書	
	(City)	(Zip code)	5	
Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an				
accept the obligations of a	ny position as registered agent.	Krista All, Asst. Secreta	•	
	(Registered agent	of Capitol Corporate So	arvices, Inc.	
2 The name title or care	icity and address of the person(s) who has			
•	•	HAM, MILES COOK, BRUCE EA	TROFF.	
	TOM SCHAUERMAN, and JO			
CFO: CHRIS THO				
			· 	
 Attached is a certificate jurisdiction under the law of the translator must be su 	of which it is organized. If the certificate abmitted)	ily authenticated by the official having custo is in a foreign language, a translation of the	dy of records in the certificate under oath	
Signature of an authorized person				
This document is executed in accordance with section \$65.0203 (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.				
	CHRIS THOM			
	Typed or printed near	ne of sign es		

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CYBER RISK MANAGEMENT, LLC" IS DULY

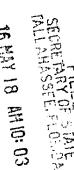
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

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

OFFICE SHOW, AS OF THE EIGHTH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CYBER RISK
MANAGEMENT, LLC" WAS FORMED ON THE EIGHTH DAY OF APRIL, A.D. 2013.

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



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SR# 20161556373
You may verify this certificate online at corp.delaware.gov/authver.shtml

MSRS.

Authentication: 201952213

Date: 03-08-16