Division of Corporations

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Foreign Limited Liability Company Consolidated Data Sources, LLC

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D. SCOTT

SEP 27 2016

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Consolidated Data Sour					
(Name of Fore	ign Limited Liability Company; must include "I	Jimited Liability Company," "L.L.C.," or "L	.LC.")		
(If name unavailable, enter alt	ternate name adopted for the purpose of transact	ing business in Florida. The alternate name	must include	'Limite	đ
Liability Company," "L.L.C,"	or "LLC.")	•			
2. Delaware	of which foreign limited liability	(FEI number, if applicable)			
company is organized)	of which foreign timited hadding	(Per number, it appressie)			
4	(Date first transacted business in Florid	o if prior to remistration			
	(See sections 605.0904 & 605.0905, F.S. (to determine penalty liability)			
5. 101 North Seventh Str	cet, Suite 501				
Louisville, KY 40202					
	(Street Address of Principal Of	fice)			
6. 500 N. Michigan Ave #	1540				
Chicago, IL 60611					
	(Mailing Address)				
7. Name and street address	s of Florida registered agent: (P.O. Box N	OT acceptable)			
Name:	Corporate Creations Network Inc.		₹.0		
Office Address:	11380 Prosperity Farms Road #221E	<u></u>		<u></u>	
	Palm Beach Gardens	, Florida 33410		SEP.	T
	(City)	(Zip code)	沒熟	2	
Registered agent's accep-	tance:	The above been admind floridated the bill			m
- Having been named as re- designated in this applica	gistered agent and to accept service of pro tion, I hereby accept the appointment as re	cess for the above stated timited tidotil egistered agent and agree to act in this	capacity. I j	u ine p further	agree
to complywith the provision	ons of physiatures relative to the proper an				
accept the obligations of r	my polition as registered agant.	_	§#	ĊΠ.	
		Caitlin Lazarus, Special Secretar	у 🦈	Ġ.	
	(Registered agent'	a signature)	•		
8. The name, title or cape	ncity and address of the person(s) who has/	save authority to manage is/are:			
Philip Jenkins - Member -	500 N. Michigan Ave #1540, Chicago, IL	60611			
					
	· · · · · · · · · · · · · · · · · · ·				
9. Attached is a certificate	of existence, no more than 90 days old, dul	ly authenticated by the official having o	ustody of rec	ords in	the
jurisdiction under the law	of which it is organized. (If the certificate is				
of the translator must be st	ubmitted				
	Signature of an author	prized person			
	in accordance with section 605.0203 (1) (to the Department of State constitutes a third			tion	
	Caitlin Lazarus, Attorney-in-Fact		•		
	Typed or printed nam	e of signee			

Delaware The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CONSOLIDATED DATA SOURCES 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 TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONSOLIDATED DATA SOURCES LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF SEPTEMBER, A.D. 2015.

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

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Date: 09-26-16