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Division of Corporations Fax Number : (850)617-6383 Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:___

Foreign Limited Liability Company TAGETIK NORTH AMERICA LLC

Certificate of Status 0 Certified Copy 03 Page Count \$125.00 Estimated Charge

6.

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Help

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

IN COMPLIANCE WITH SECTION 015.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Tagetik North America (Name of Foreign	LLC Limited Eability Company; must include "	Limited Liability	Company," "L.L.C.," or "LLC.")	
III name upas allable, enter alternate is	nuc adupted the the perferse of messecting baseness	a in Florida. The at	terrate name must include "Limited Liabi	ility Company," L.L.C," or "LLC.")
2 Delaware			77-0706471	
(Jurisdiction under the law of which loveren limited liability company is organized)			(FFI number, if applicable)	
4 Upon Qualification				
4	(Date first transacted business in Florida, if (See sections 605 0904 & 605 0905, F.S. to	prior to registration determine possity	linbality)	
5 9 W Broad Street, Ste	100		Same	
(Street Address of Principal Office)		<u>.</u>	(Marling Address)	
Stamford, CT 06902				
				<u> </u>
7 Name and street address	s of Florida registered agent: (P.O	. Box NOT a	ncceptable)	ملعه
7. Name and <u>successors</u>			,	
Name:	C F Corporation System		·	٠.
Office Address:	1200 South Pine Island Road			(3
	Plantation		, Florida 33324 (Zip code	
Registered agent's accep	(Cay)		(Zip cod:	:1
	By: C T Corporation System (Registered	बदेदात्, १ स्पर्धासतायः।		Stout, Asst. Secy.
8. The name, title or capa Title or Capacity:	acity and address of the person(s) w Name and Address:	vho has/have <u>T</u>	authority to manage is/are: itle or Capacity:	Name and Address:
MANAGER	Peter F. Healy	N	IANAGER	Elizabeth Satin
	2700 Luke Cook Road Riverwoods, IL 60015			76 Ninth Ave 13th floor New York, NY 10011
MANAGER	Thomas Nestor	tana		
	New York, NY 10011	1001		
(Use attachments if neces	sary) .			
9. Attached is a certificate jurisdiction under the law of the translator most be s	of existence, no more than 90 days of which it is organized. (If the cer ubmitted)	s old, duly au tificate is in a	thenticated by the official has a foreign language, a translat	iving custody of records in the tion of the certificate under oath
10. This document is executed in a document to	outed in accordance with section 60, the Department of State constitute.	es a third dev), Florida Statutes. I am awar ree felony as provided for in	re that any false information s.817.155, F.S.
figurature of an authorized person				
	C'			
	Peter F. Henly	Typed or printed n	ome of signer	

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "TAGETIK NORTH AMERICA 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 THIRTEENTH DAY OF SEPTEMBER, A.D. 2018.

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

4453891 8300
SR# 20186643332
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203416087

Date: 09-13-18