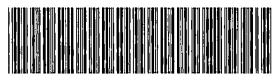
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DatamanUSA, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.	
Please return all correspondence concerning this matter to the following:	
NIDHI SAXENA Name of Person	
Datamanusanic	2018
Firm/Company	ე <u>ნ</u> ე −
6890 S Tucson Way, SLT 100 Address	2018 DEC -3 PH 12: 1:7
Centernial, (08012 City/State and Zip Code	 12: 1: 7
Contacto datamanusa, com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
NIDHI SAXENA at (720) 248 310 Name of Contact Person Area Code Daytime Telephone Number	
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
Enclosed is a check for the following amount: S125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy Certified	

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

IN COMPLIANCE WITH SEC COMPANYTO TRANSACT BE	CTION 605.0902, FLORIDA STATUTES, TI USINESS INTHE STATE OF FLORIDA:	HE FOLLOWING IS SUBMITTED TO REGIST.	ER A FOREIGN LIMITED LIABILITY
1. Datamanus (Name of Foreign	A LLC Limited Liability Company; must include "I	imited Liability Company, ""L.L.C.," or "LTC.")	
	same adopted for the purpose of transacting business	in Florida. The alternate name must include "Limited Liab	
2. Colorado (Jurisdiction under the law of w	nich foreign binnted hability company is organized)	3. <u>84-1552228</u>	er if annheable)
	, , , ,	,	-, - ,,
4	(Date first transacted business in Florida, if pr (See sections 605.0904 & 605.0905, F.S. to e	nor to registration.)	
5 1.000 S T 150			
5. GSAO S TULSO (Street Address of	Principal Office)	6. 6810 S Tucum Wa Manual Centernial, cos	as 50 100
Ste 100		centernial, cos	30112
Centennial, C	0 30112		 9
7. Name and street addres	ss of Florida registered agent: (P.O.	Box NOT acceptable)	8 0 78 80 0 8 8 0 0 8 8 0 0 8 8 0 0 8
		•	EC ***
Name:	Registered Agents Leg		<u>ن</u> آور ا
Office Address:	155 Office Plaza D		A ROLL
	Tallahassee	, Florida <u>3230</u>	<u> </u>
Registered agent's accep		(Zip code	61 HOM HE
		e of process for the above stated limited ent as registered agent and agree to act t	
to comply with the provisi	ions of all statutes relative to the pr	oper and complete performance of my a	
and accept the obligation	s of my position as registered agen	Darba	
		UVUU	
		gent's signature) \	
8. The name, title or cap: Title or Capacity:	acity and address of the person(s) wh Name and Address:	no has/have authority to manage is/are: Title or Capacity:	Name and Address:
President		<u> </u>	Transfer Page 1999
PIENZEM	NIDHI SAXENA		
	St 100, Centernia	80(1)	
(Use attachments if neces	carry)		
	• •		
 Attached is a ceruncate jurisdiction under the law of the translator must be s 	of which it is organized. (If the certi-	old, duly authenticated by the official har ficate is in a foreign language, a translati	ving custody of records in the on of the certificate under oath
10. This document is exec submitted in a document to	uted in accordance with section 605. the Department of State constitutes	0203 (1) (b), Florida Statutes. I am award a third degree felony as provided for in s	that any false information
	· Widhi	Sague	
	Sig	nature of an authorized person	

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

DatamanUSA,llc

is a

Limited Liability Company

formed or registered on 07/11/2000 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20001134948.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/21/2048 that have been posted, and by documents delivered to this office electronically through 11/26/2018 @ 12:57:37.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 11/26/2018 @ 12:57:37 in accordance with applicable law. This certificate is assigned Confirmation Number 11242363



Secretary of State of the State of Colorado

**************End of Certificate*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/hiz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."