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(City/State/Zip/Phone #)

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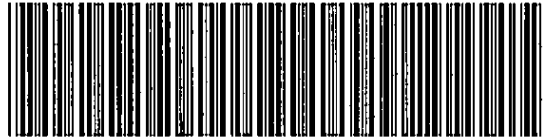
(Business Entity Name)

(Document Number)

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CLERK OF COURT

D. BRUCE
OCT 19 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Epiq Global Business Transformation Solutions, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Shiloh White

Name of Person

Epiq

Firm/Company

501 Kansas Avenue

Address

Kansas City, KS 66105

City/State and Zip Code

swhite@epiqglobal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shiloh White

913

621-9528

Name of Contact Person

at () Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**



\$125.00 Filing Fee



\$130.00 Filing Fee &
Certificate of Status



\$155.00 Filing Fee &
Certified Copy



\$160.00 Filing Fee, Certificate
of Status & Certified Copy

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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 FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Epiq Global Business Transformation Solutions, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 84-3073370
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 777 Third Avenue 501 Kansas Avenue
(Street Address of Principal Office) (Mailing Address)

12th Floor

New York, NY 10017

Kansas City, KS 66105

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Cogency Global Inc.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee 32301
(City) , Florida (Zip code)

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 comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Laura M. Brainard

Laura M. Brainard, Assistant Secretary

(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☐ Manager Name: Document Technologies, LLC

☒ Member Address: Two Ravinia Drive

☐ Authorized Suite 850

Person Atlanta, GA 30346

☐ Other ☐ Other

☐ Manager Name: Philip Burright

☐ Member Address: 501 Kansas Avenue

☒ Authorized

Person Kansas City, KS 66105

☐ Other ☐ Other

☐ Manager Name: Shiloh White

☐ Member Address: 501 Kansas Avenue

☒ Authorized

Person Kansas City, KS 66105

☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: Alison Wisniewski

☐ Member Address: 777 Third Avenue

☒ Authorized 12th Floor

Person New York, NY 10017

☐ Other ☐ Other

☐ Manager Name: Terri Helt

☐ Member Address: 501 Kansas Avenue

☒ Authorized

Person Kansas City, KS 66105

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (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.

Shiloh White
Signature of an authorized person

Shiloh White
Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "EPIQ GLOBAL BUSINESS TRANSFORMATION
SOLUTIONS, 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 THIRD DAY OF OCTOBER,
A.D. 2019.



7604994 8300

SR# 20197003335

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203719549

Date: 10-03-19