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SECRETARY OF STATE
ANIASSEE, FLORIDA

45



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 108854 4351652

AUTHORIZATION : Smill al

COST LIMIT : \$ 1254.00

ORDER DATE: December 19, 2019

ORDER TIME : 9:47 AM

ORDER NO. : 108854-085

CUSTOMER NO: 4351652

FOREIGN FILINGS

NAME: HITACHI VANTARA LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

COVER LETTER

то:	Registration Section Division of Corporation	s			
SUBJEC	Hitachi Vantara LLC				
	···	Name	of Limited Liability	Company Company	
					usiness in Florida," Certificate only to transact business in Florid
Please re	eturn all correspondence c	oncerning this matter to	the following:		
		Name of Person Firm/Company			
			Firm/Company		2070 JF
			Address		
		Cit	ty/State and Zip Cod	le	PH 4: 44 E. FLOFIDA
	<u></u>	E-mail address: (to be	used for future annu	al report notification	
For furth	ner information concerning	this matter, please call:			
			at ()	
	Name of	Contact Person	Area Cod	e Daytime Tele	ephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADDRI Division of Corpo Registration Section Clifton Building 2661 Executive Corporation of the Corporation of Corporat	orations on enter Circle
	Enclosed is a check for th Please make check payable		ARTMENT OF STA	ATE	
	\$125.00 Filing Fee	S130.00 Filing Fe		0 Filing Fee & Fied Copy	\$160.00 Filing Fee. Certification of Status & Certified Copy

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

IN COMPHANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

DE			0.4.2000.4.40	
		_ 3.	84-3098448	
(Jurisdiction under the law of w	nich foreign limited liability company is organized)	_	(FEI number, if applicable)	
			2020 SEC TALII	
	(Date first transacted business in Florida, if pr (See sections 605 0904 & 605.0905, F.S. to d	or to registration) etermine penalty lial	ability)	Ţį.
2535 Augustine Drive Santa Clara, CA 95054 (Street Address of Principal Office)			2535 Augustine Drive Santa Clara, GA 9505	54_
(Sireet Address of I	Principal Office)		(Mailing Address) MC P	
			TE ATTE	
Name and street addres	ss of Florida registered agent: (P.O.	Box <u>NOT</u> acc	TE A	
Name and street addres Name:	SS of Florida registered agent: (P.O. Corporation Service Company	Box <u>NOT</u> acc	TE A	
		Box <u>NOT</u> acc	TE A	
Name:	Corporation Service Company	Box <u>NOT</u> acc	TE A	

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: Title or Capacity: Name and Address: Name: Christopher H. Leslie × Manager Manager Name: ____ 2535 Augustine Drive, Santa Clara, CA 95054 Member Member Address: Authorized Authorized Person Person Other Other _____ Other ____ Other Manager Manager Name: ____ ____ Member Address: ___ Member Address: ____ Authorized Authorized Person Person Other____ Other Other_ Manager Name: Manager Member Member Address: Authorized Authorized Person Person Other____ Other_ Other___ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Signature of an authorized person Christopher H. Leslie

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "HITACHI VANTARA 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 NINETEENTH DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HITACHI VANTARA LLC" WAS FORMED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2019.

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

DEURLIARY OF STATE

Jeffrey W. Buflock, Secretary of

Authentication: 204262256

Date: 12-19-19

7611629 8300
SR# 20198761974
You may verify this certificate online at corp.delaware.gov/authver.shtml