M2000001041

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2020 JAN 24 Ph 12: 29

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JAN 27 2020 M. SOLOMON CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 150602 8146088

AUTHORIZATION : Sprelbless

COST LIMIT : (\$\125.00

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ORDER DATE : January 23, 2020

ORDER TIME : 9:27 AM

ORDER NO. : 150602-005

CUSTOMER NO: 8146088

FOREIGN FILINGS

NAME: STAGWELL MARKETING GROUP LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

COVER LETTER

	egistration Section vision of Corporations				
SUBJECT:	Stagwell Marketing Group LLC				
	Name of Limited Liability Company				
The enclose Existence, a	ed "Application by Foreign Limited Liability and check are submitted to register the abov	y Company for Au e referenced foreig	thorization to Transact Business in Florida," Certificate o on limited liability company to transact business in Florida		
Please retur	n all correspondence concerning this matter	to the following:			
	Ryan Greene				
		Name of Pers	on		
	Stagwell Marketing Group LLC				
		Firm/Compan	у		
	18081 Street, NW,				
		Name of Limited Liability Company tion by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of the submitted to register the above referenced foreign limited liability company to transact business in Florida. Company to transact business in Florida. Foreign Limited Liability Company to transact business in Florida. Florida. Foreign Limited Liability Company to transact Business in Florida. Florida. Foreign Limited Liability Company to transact Business in Florida. Florida. Florida. Foreign Limited Liability Company to transact Business in Florida. Flo			
	Washington, DC, 20006				
		City/State and Zip	Code		
			unual report notification)		
or further i	nformation concerning this matter, please co	all:			
Ry	an Greene	-4.6			
	Name of Contact Person				
	AILING ADDRESS:				
Reg	gistration Section D. Box 6327		Registration Section		
	lahassee, FL 32314		Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
	closed is a check for the following amount: ase make check payable to: FLORIDA DE	PARTMENT OF	STATE		
	\$125.00 Filing Fee \$130.00 Filing Certificate		55.00 Filing Fee & \$160.00 Filing Fee, Certificate Certified Copy of Status & Certified Copy		

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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

	n Limited Liability Company; must include "Limited I	Liability Company," "L.L.C.," or "LLC.")	
me unavailable, enter alternate	name adopted for the purpose of transacting business in Florida	a. The alternate name must include "Limited Liability Company,	" "L. L.,C," or "LLC.")
elaware		36-4863118	
Jurisdiction under the law of w	which foreign limited liability company is organized)	3. (FEI number, if applicable	:)
	(Date first transacted business in Florida, if prior to regi (See sections 605,0904 & 605,0905, F.S. to determine	istration.) pensity liability)	
	Washington DC 20006	6.	
(Street Address of	Principal Office)	O. (Mailing Address)	
			
			 ·
ame and street addres	ss of Florida registered agent: (P.O. Box N	OT acceptable)	
	Corporation Service Company		
Name:	Corporation Service Company		
Name:			
Name: Office Address:	Corporation Service Company 1201 Hays Street		
		32301	
	1201 Hays Street		
Office Address:	1201 Hays Street Tallahassee (City)	32301 , Florida	
Office Address:	1201 Hays Street Tallahassee (City)	32301 , Florida	mpany at the pla
Office Address: stered agent's accep ng been named as re nated in this applica	1201 Hays Street Tallahassee (City) Itance: rgistered agent and to accept service of procition, I hereby accept the appointment as re	32301, Florida (7ip code) cess for the above stated limited liability congristered agent and agree to act in this capa	city. I further as
Office Address: stered agent's accep ng been named as re nated in this applica mply with the provisi	1201 Hays Street Tallahassee (City) stance: gistered agent and to accept service of proction, I hereby accept the appointment as relions of all statutes relative to the proper an	32301, Florida (7ip code) cess for the above stated limited liability con	city. I further as
Office Address: stered agent's accep ng been named as re nated in this applica mply with the provisi	1201 Hays Street Tallahassee (City) Itance: rgistered agent and to accept service of procition, I hereby accept the appointment as re	32301, Florida (7ip code) cess for the above stated limited liability congristered agent and agree to act in this capa	city. I further as

(Registered agent's signature)

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: Ryan J. Greene Manager Name: 1808 I Street, NW Member Address: Member Address: Washington DC 20006 Authorized Authorized Person Person Other Other____ Other___ Other___ Manager Manager Member Address: Member Address: Authorized ☐ Authorized Person Person Other_ Other____ Other___ Other Manager Name: _____ Manager Name: ___ Member Address: Member Address: Authorized ☐ Authorized Person Person Other 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. Ryan J. Greene

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "STAGWELL MARKETING GROUP 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-THIRD DAY OF JANUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STAGWELL MARKETING GROUP LLC" WAS FORMED ON THE NINTH DAY OF MARCH, A.D. 2017.

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

Authentication: 202246338

Date: 01-23-20