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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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 Insight Vertex, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$125.00



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Help

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:

colorado	high foreign limited liability company is organized)	n Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LEC 3
uniderion ander the 13% of w	ach foligh ninited flability conspany is diganized)	(FR) number, it approaches
	(Date first transacted business in Florida, if pric (See sections 605,0904 & 605,0905, F.S. to de-	or to registration.) termine penalty liability)
'901 4th S		7901 4th St N
(Street Address of	Principal Office)	STE 300
		St. Petersburg FL 33702
St. Petersb	uiu ml 33/02	OL ECICIONALIA EL OCTUA
Same and <u>street addre</u> Name: Office Address:	Northwest Registered 7901 4th St N S	Agent LLC
Name:	SS of Florida registered agent: (P.O. I	Agent LLC

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: Kirsten Messer Name: ______ Manager Manager | 7901 4th St N STE 300 **⊠**Member Member Address: St. Petersburg FL 33702 Authorized -Authorized Person Person Other____ _____Other_____ Other Other _____ Name: Name: Manager Manager Member Address: Member Address: Authorized ☐ Authorized Person Person Other Other_____ Other____ Other Manager Manager Manager Name: Member Member Address: ______ 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. Morgan Noble

Exped or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Insight Vertex, LLC

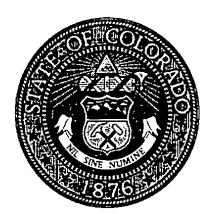
is a

Limited Liability Company

formed or registered on 10/11/2019 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 20191818989.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/11/2020 that have been posted, and by documents delivered to this office electronically through 06/12/2020 @ 19:15:55.

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 06/12/2020 @ 19:15:55 in accordance with applicable law. This certificate is assigned Confirmation Number 12401295 .



Secretary of State of the State of Colorado

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.uv/htt/Certificate/ScatchCriteria 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."