

M20000010188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

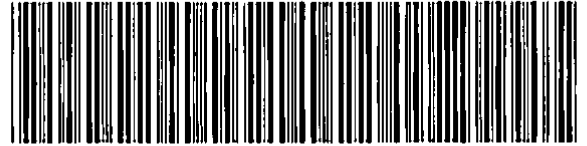
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2020 NOV 10 AM 10:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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2020 NOV 10 PM 12:30

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

NOV 10 2020

Assembly



COGENCYGLOBAL

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 11/10/2020

Name: Merritt Walker

Reference #: 1284273

Entity Name: BARKAWI USA, LLC

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

**FILE SECOND**

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: \$125

Signature: 

• CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40TH ST, 10TH FL  
NY, NY 10016  
D: +1.212.947.7200  
P: 800.221.0102  
F: 800.944.6607

• EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES,  
REGISTRY #8010712  
6 LLOYDS AVE, UNIT 4CL  
LONDON EC3N 3AX  
+44 (0)20.3961.3080

• ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
UNIT B, 1/F, LIPPO LEIGHTON TOWER  
103 LEIGHTON RD, CAUSEWAY BAY  
HONG KONG  
P: +852.2682.9633  
F: +852.2682.9790

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Barkawi USA, 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:

Mariee Pilkington

Name of Person

Genpact LLC

Firm/Company

1155 Avenue of the Americas, 4th Fl.

Address

New York, NY 10036

City/State and Zip Code

mariee.pilkington@genpact.com

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

For further information concerning this matter, please call:

Mariee Pilkington

Name of Contact Person

at ( 917 )

Area Code

407-5055

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

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. Barkawi USA, 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 3. 27-1620071  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 11/1/2020  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 100 Galleria Parkway, Suite 1500, 6. 1155 Avenue of the Americas, 4th Fl.  
(Street Address of Principal Office) (Mailing Address)

Atlanta, GA, 30339

New York, NY 10036

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

Name: COGENCY GLOBAL INC.

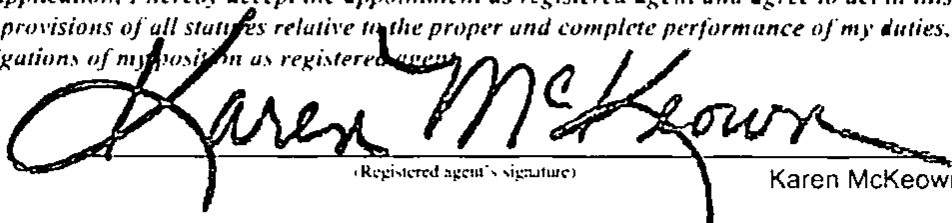
Office Address: 115 North Calhoun St. Suite 4

Tallahassee, Florida 32301  
(City) (Zip code)

FILED  
2020 NOV 10 AM 10:28  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

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.



(Registered agent's signature)

Karen McKeown, Asst. Sec.

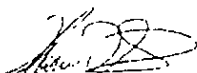
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Mike Landry</u>	<input type="checkbox"/> Manager	Name: <u>Heather White</u>
<input type="checkbox"/> Member	Address: <u>100 Galleria Parkway, Suite 1500,</u>	<input type="checkbox"/> Member	Address: <u>1155 Avenue of the Americas,</u>
<input checked="" type="checkbox"/> Authorized	Address: <u>Atlanta, GA, 30339</u>	<input checked="" type="checkbox"/> Authorized	Address: <u>4th Fl., New York, NY 10036</u>
Person		Person	
<input checked="" type="checkbox"/> Other <u>President</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>SVP</u>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Thomas D. Scholtes</u>	<input type="checkbox"/> Manager	Name: <u>Lucinda Full</u>
<input type="checkbox"/> Member	Address: <u>1155 Avenue of the Americas</u>	<input type="checkbox"/> Member	Address: <u>1155 Avenue of the</u>
<input checked="" type="checkbox"/> Authorized	Address: <u>4th Fl., New York, NY 10036</u>	<input checked="" type="checkbox"/> Authorized	Address: <u>Americas, 4th Floor</u>
Person		Person	Address: <u>New York, NY 10036</u>
<input checked="" type="checkbox"/> Other <u>VP &amp; Secretary</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>SVP &amp; Treasurer</u>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Barkawi Management Consultants GmbH &amp; Co. KG</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>Baierbrunner Strasse 35,</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Address: <u>81379 Munich, Germany</u>	<input type="checkbox"/> Authorized	Address: _____
Person		Person	
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other _____	<input type="checkbox"/> 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 is a third degree felony as provided for in s.817.155, F.S.



Signature of an authorized person

Thomas D. Scholtes, Vice President & Secretary

Typed or printed name of signer

# Delaware

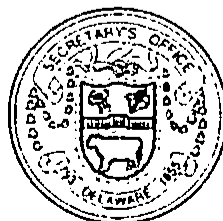
The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BARKAWI USA, 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 NINTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BARKAWI USA, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2009.

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

4766226 8300

SR# 20208293173

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 204037096

Date: 11-09-20