

m20000011641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

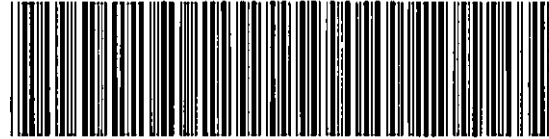
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Corp with drew 09/28/20
(F16000000417)
mud cus.

Office Use Only



900330888829

10/27/20--01028--012 **125.00

REC'D
CLERK OF STATE
20 DEC 16 AM 11:30
OFFICE OF STATE
CLERK OF STATE

DEC 16 2020

D CUSHING

September 22, 2020

Florida Department of State
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To whom it may concern:

Please note that 4th Source Inc has changed its status to 4th Source LLC. Enclosed you will find:

- Previous correspondence where \$35 filing fee was received
- Completed Withdraw Form
- Complete Registration Form
- Articles of Incorporation for new Delaware firm
- \$125 Registration Fee

Should there be any question please reach out to Ashlee Stormer
(Ashlee.Stormer@Agilethought.com) at 727-742-7172 or by mail at 2502 N. Rocky Pt. Dr. Suite
960, Tampa, FL 33607.

Thank you,

Ashlee Stormer
Director of Finance

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4th Source 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:

Ashlee Stormer
Name of Person

4th Source LLC
Firm/Company

2002 N. Rocky Pt. Dr. Ste 900
Address

Tampa FL 33607
City/State and Zip Code

Ashlee.stormer@agilethought.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashlee Stormer at (727) 740-7172
Name of Contact Person Area Code Daytime Telephone Number

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 23, 2020

ASHLEE STORMER
4TH SOURCE LLC
2502 N ROCKY PT DR., STE 960
TAMPA, FL 33607

SUBJECT: 4TH SOURCE, LLC
Ref. Number: W20000123685

We have received your document for 4TH SOURCE, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 820A00023549

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. 4th Source 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
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 20-12776210
(FEI number, if applicable)

4. 11/10/2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2502 N. Rocky Pt Dr.
(Street Address of Principal Office)

6. 2502 N. Rocky Pt. Dr.
(Mailing Address)

Suite 900

Suite 900

Tampa FL 33607

Tampa FL 33607

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

Name: Agile Thought LLC

Office Address: 2502 N. Rocky Pt. Dr. Ste 900

Tampa, Florida 33607
(City) (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.

Maurice Stewart
(Registered agent's signature)

20 DEC 16 AM 11:30
CLERK OF STATE
JAN 31 2018

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: Manuel Senderos

☐ Member Address: 2502 N. Rocky Pt. Dr.

☐ Authorized Suite 900

Person Tampa FL 33607

☒ Other President ☐ Other _____

Title or Capacity: Name and Address:

☐ Manager Name: Federico Tagliani

☐ Member Address: 2502 N. Rocky Pt. Dr.

☐ Authorized Suite 900

Person Tampa FL 33607

☒ Other CEO ☐ Other _____

☐ Manager Name: Jorge Alejo

☐ Member Address: 2502 N. Rocky Pt. Dr.

☐ Authorized Suite 900

Person Tampa FL 33607

☒ Other Treasurer ☐ Other _____

☐ Manager Name: Cardyne Cesar

☐ Member Address: 2502 N. Rocky Pt. Dr.

☐ Authorized Suite 900

Person Tampa FL 33607

☒ Other Secretary ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ 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.

Ashlee Stalmer
Signature of an authorized person

Ashlee Stalmer
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 THAT "4TH SOURCE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF CONVERSION", FILED THE FIFTEENTH DAY OF NOVEMBER, A.D. 2018, AT 9:58 O'CLOCK A.M.

CERTIFICATE OF FORMATION, FILED THE FIFTEENTH DAY OF NOVEMBER, A.D. 2018, AT 9:58 O'CLOCK A.M.

CERTIFICATE OF MERGER, FILED THE FIFTEENTH DAY OF NOVEMBER, A.D. 2018, AT 2:32 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "4TH SOURCE, LLC".



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

7149164 8310

SR# 20208081168

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

Authentication: 204049889

Date: 11-10-20