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(Re	equestor's Name)					
(Ac	ldress)					
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PICK-UP	☐ WAIT	MAIL				
(Bu	usiness Entity Nam	ne)				
(Document Number)						
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T. LEMIEUX MAR 3 1 2022



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088 March 30, 2022 Name: GREG PINTACUDA 1605829 Reference #:____ **HOODOO DIGITAL, LLC** Entity Name:____ ✓ Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent Reinstatement Conversion Merger Dissolution/Withdrawal Fictitous Name Apon filing please provide certified copy ✓ Other Authorized Amount:

Signature:

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		HOODOO DI	GITAL, LI	LC					
	(Name of Foreign Li	mited Liability Company; must include "Limit	ed Liability Co	ompany," "L.L.C"	or "LLC.")				
(If nam	ne unavailable, enter alternate nam	e adopted for the purpose of transacting business in F	orida. The alterna	te name must include	"Limited Liability Co	ompany," "L.L.C	." or "LLC],")	
2.	Utah			81-5275554					
<u></u>	Jurisdiction under the law of whic	h foreign limited hability company is organized)			(FEI number, if a	iplicable)	_	•	
4.	11/30/2021								
		(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to deterr	registration nine penalty liabil	ity)		_			
5.	132 South	132 South State Street		155 Avenue of the Americas, 4th Fl.					
- <u>-</u>	(Street Address of Principal Office)				(Mailing Address)			•	
_	Salt Lake City, UT 84111			New York, NY 10036					
						ç.·			
7. N	ame and street address	of Florida registered agent: (P.O. Bo	x <u>NOT</u> acce	eptable)		St Cally	2022 MAR 30	т,	
	Name:	COGENCY GLOBAL	INC.	·		NE GE	30 AM	FILED	
Office Address: _		115 North Calhoun St. S	Suite 4	<u> </u>		STATE	H 9: 15		
		Tallahassee		, Florida	32301	75. °	Oi		
-		(Uny)		_ · _	(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.

(Registered astent's signature)

(Registered astent'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: Genpact USA, Inc. Thomas D. Scholtes Name: Name: Manager Manager 1155 Avenue of the 1155 Avenue of the Address: _ Member Address: Americas, 4th Floor Americas 4th Floor |X| Authorized Authorized New York, NY 10036 New York, NY 10036 Person Person _Other____ Other___ Other___ [_]Other___ Lucinda Full Ronald Shamah Name: Manager Name: ___ Address: _ 1155 Avenue of the 29 North Wacker Dr Member | | Member Address: 4th Floor Americas 4th Floor Authorized Chicago, IL 606063 New York, NY 10036 Person Person Other Other [Other Other Naris Apichai Kem Elbrader Manager Name: Manager Name: Address: 132 South State Street 29 North Wacker Dr ∐Member Address: | Member 4th Floor Salt Lake City, UT 84111 ⊠Authorized Authorized Chicago, IL 606063 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.

Thomas D. Scholtes

Typed or printed name of signee

HOODOO Digital, LLC – Attachment

Additional Authorized Individuals

Andrew Wakefield Authorized Person 132 South State Street

Salt Lake City, UT 84111

USA

Jobin Ephrem Authorized Person 29 North Wacker Drive, 4th Floor

Chicago, IL 60606

USA





Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705
Salt Lake City, UT 84114-6705
Service Center: (801) 530-4849
Toll Free: (877) 526-3994 Utah Residents
Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

03/30/2022 10257987-016003302022-824025

CERTIFICATE OF EXISTENCE

Registration Number:

Business Name:

Registered Date:

Entity Type:

Status:

10257987-0160

HOODOO DIGITAL, LLC

February 08, 2017

LLC - Domestic

Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



L. Weillette

Leigh Veillette Director Division of Corporations and Commercial Code