

M23000002652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

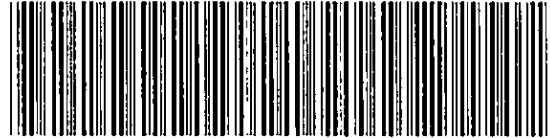
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2023 MAR -2 AM 10:36

SECRETARY OF STATE  
CORPORATE SERVICES DIVISION  
TALLAHASSEE, FLORIDA

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FILE  
CORPORATE SERVICES DIVISION  
TALLAHASSEE, FLORIDA

MAR - 3 2023

M. SOLOMON

FILE 2ND

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 543974 7353928

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : March 2, 2023

ORDER TIME : 2:35 PM

ORDER NO. : 543974-010

CUSTOMER NO: 7353928

FOREIGN FILINGS

NAME: LIONBRIDGE TECHNOLOGIES, LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: \_\_\_\_\_

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Lionbridge Technologies, 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:

Annmarie Manuel

Name of Person

Lionbridge

Firm/Company

890 Winter Street, Suite 225

Address

Waltham, MA 02451

City/State and Zip Code

annmarie.manuel@lionbridge.com

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Annmarie Manuel

978

964-2419

Name of Contact Person

at ( )

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

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. Lionbridge Technologies, 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. 04-3398462  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. under name of Lionbridge Technologies, Inc. converted to a limited liability company  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 890 Winter Street, Suite 225 6. 890 Winter Street, Suite 225  
(Street Address of Principal Office) (Mailing Address)

Waltham, MA 02451

Waltham, MA 02451

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(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.

Corporation Service Company

By: Alexis Weibel, assistant vice president  
(Registered agent's signature)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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: John Fennelly

☐ Member Address: c/o Lionbridge,

☐ Authorized 890 Winter Street, Suite 225

Person Waltham, MA 02451

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Matthew Lozow

☐ Member Address: c/o Lionbridge

☐ Authorized 890 Winter Street, Suite 225

Person Waltham, MA 02451

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Aaron Tolson

☐ Member Address: c/o Lionbridge

☐ Authorized 890 Winter Street, Suite 225

Person Waltham, MA 02451

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Rory Cowan

☐ Member Address: c/o Lionbridge

☐ Authorized 890 Winter Street, Suite 225

Person Waltham, MA 02451

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Arjun Madam Mohan

☐ Member Address: c/o Lionbridge

☐ Authorized 890 Winter Street, Suite 225

Person Waltham, MA 02451

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Zachary Horat

☐ Member Address: c/o Lionbridge

☐ Authorized 890 Winter Street, Suite 225

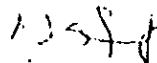
Person Waltham, MA 02451

☐ 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.



Signature of an authorized person

John Fennelly

Typed or printed name of signer

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CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

**Lionbridge Technologies, LLC**

**Item #8 Continued - Authorized Persons**

Name	Title	Address
John Fennelly	President & CEO	c/o Lionbridge, 890 Winter Street, Suite 225, Waltham, MA 02451
Clemente Cohen	CFO & Secretary	c/o Lionbridge, 890 Winter Street, Suite 225, Waltham, MA 02451
Brian O'Donnell	Treasurer	c/o Lionbridge, 890 Winter Street, Suite 225, Waltham, MA 02451

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CLERK OF SUPERIOR COURT  
JULIA M. GREGG, CLERK  
MASSACHUSETTS

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIONBRIDGE TECHNOLOGIES, 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 SECOND DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIONBRIDGE TECHNOLOGIES, LLC" WAS FORMED ON THE TENTH DAY OF OCTOBER, A.D. 1997.

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



2806855 8300

SR# 20230847826

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

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

Authentication: 202824281

Date: 03-02-23