

Florida Department of State
 Division of Corporations
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To: Division of Corporations
 Fax Number : (350)617-6383

From: Account Name : A1A REGISTERED AGENT INC.
 Account Number : 120090000032
 Phone : (561)792-2235
 Fax Number : (561)202-8882

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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2024 NOV 15 PM 3:18

FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

Foreign Limited Liability Company
 IDATA GLOBAL ANALYTICS LLC

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

FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

2024 NOV 15 PM 1:14

APPROVED
 AND
 FILED



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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. IDATA GLOBAL ANALYTICS LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name is available, enter alternate name accepted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")

2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. 38-4085415 (Fed. number, if applicable)

4. (Date first transacted business in Florida, if prior to registration) (See sections 605.0901 & 605.0902, F.S. to determine penalty liability)

5. 333 SE 2ND AVENUE SUITE 2000 MIAMI, FL 33131 (Street Address of Principal Office) 6. 333 SE 2ND AVENUE SUITE 2000 MIAMI, FL 33131 (Mailing Address)

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

Name: A1A REGISTERED AGENT INC. Office Address: 5647 110TH AVENUE NORTH ROYAL PALM BEACH, Florida 33411 (City) (Zip code)

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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.

[Signature] (Registered agent's signature)

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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: QUINTERO SANDOVAL, BYRON ELIAS

Member Address: 1240 W PEACHTREE ST NW

Authorized #611

Person: ATLANTA, GA 30309

Other _____ Other _____

Title or Capacity: Name and Address:

Manager Name: HOYOS VALENCIA, VICTOR MANUEL

Member Address: DAKOTA 2 CASA 101

Authorized NORTE AMERICA BELLO

Person: ANTIOQUIA, COLOMBIA

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person: _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person: _____

Other _____ 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.

Signature of an authorized person

BYRON ELIAS QUINTERO SANDOVAL

Typed or printed name of signer

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IDATA GLOBAL ANALYTICS 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 FIFTEENTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IDATA GLOBAL ANALYTICS LLC" WAS FORMED ON THE ELEVENTH DAY OF JUNE, A.D. 2018.

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



Handwritten signature of Jeffrey W. Bullock

Jeffrey W. Bullock, Secretary of State

6926932 8300

SR# 20244223300

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

Authentication: 204883882

Date: 11-15-24

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