

M240000/4696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

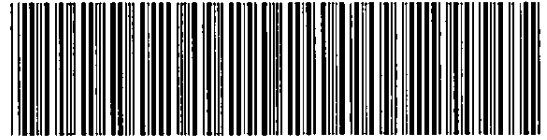
Special Instructions to Filing Officer:

W24-153293 *Mary Title*

Office Use Only

K. SALY

NOV 20 2024



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2024 NOV 13 PM 5:12

CLERK OF THE COURT
SALT LAKE COUNTY, UTAH

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2024 NOV 13 AM 11:28

CLERK

CLERK

11/13



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext:

To: Department Of State, Division Of Corporations
From: Ben Bolen
Ext:
Date: 11/13/24
Order #: 1678145-1
Re: Cadena Platforms LLC
Processing Method: Routine

A handwritten signature in black ink, appearing to read "Ben Bolen", is written over a faint, circular, dotted background.

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority
Certificate of Good Standing/Existence
Amount to be deducted from our State Account: \$125 - FL State Account Number:
120000000195

Please take the following action:
File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 14, 2024

CSC

SUBJECT: CADENA PLATFORMS LLC
Ref. Number: W24000153293

RESUBMIT
Please give original
submission date as file date.

We have received your document for CADENA PLATFORMS LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

Please state the title for Fadi Chehade.,

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 524A00024918

RECEIVED
2024 NOV 20 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Cadena Platforms 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:

Samantha Payne

Name of Person

Identity Digital Inc.

Firm/Company

10500 NE 8th St., Suite 750

Address

Bellevue, WA 98004

City/State and Zip Code

corporatefilings@identity.digital

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

For further information concerning this matter, please call:

Samantha Payne

425

298-2200

at (_____)

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

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. Cadena Platforms 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. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. August 19, 2024
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 880 Apollo Street 6. 10500 NE 8th Street
(Street Address of Principal Office) (Mailing Address)

Suite 201 Suite 750

El Segundo, CA 90245 Bellevue, WA 98004

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee 32301
(City) , Florida (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.

Shauna Godbolt

FILED
2024 NOV 13 PM 5:12
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA

FILED

2024 NOV 13 PM 5:12

SECRETARY 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: Eman Hashem Safadi

☐ Member Address: 880 Apollo Street

☐ Authorized Suite 201

Person El Segundo, CA 90245

☐ Other ☐ Other

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

☒ Manager Name: Marie Wieck

☐ Member Address: 880 Apollo Street

☐ Authorized Suite 201

Person El Segundo, CA 90245

☐ Other ☐ Other

☒ Manager Name: Akram Atallah

☐ Member Address: 880 Apollo Street

☐ Authorized Suite 201

Person El Segundo, CA 90245

☐ Other ☐ Other

☒ Manager Name: Naveed Ihsanullah

☐ Member Address: 880 Apollo Street

☐ Authorized Suite 201

Person El Segundo, CA 90245

☐ Other ☐ Other

☒ Manager Name: Fadi Chehade

☐ Member Address: 880 Apollo Street

☐ Authorized Suite 201

Person El Segundo, CA 90245

☐ Other ☐ Other

☐ Manager Name: Alvaro Alvarez

☐ Member Address: 10500 NE 8th Street

☒ Authorized Suite 750

Person Bellevue, WA 98004

☒ Other Secretary ☐ 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

ALVARO ALVAREZ

Typed or printed name of signer QUAL-50968

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CADENA PLATFORMS 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 EIGHTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CADENA PLATFORMS LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2023.

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

FILED
2024 NOV 13 PM 5:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2418377 8300

SR# 20244160623

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

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

Jeffrey W. Bullock, Secretary of State

Authentication: 204826576

Date: 11-08-24