

11/9/2020

Division of Corporations

**PROVIDED 86877**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

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

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**Azimuth Merger Co., Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

CDV 10 2020

T. SCOTT

2020 NOV -9 AM 9:49

FILED

2020 NOV -9 AM 11:26

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be, Azimuth Merger Co., Inc.

Principal street address

1201 South Joyce Street

Suite C006

Arlington, VA 22202

Mailing address, if different is:

The purpose for which the corporation is organized is: any purpose permitted under applicable law.

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2020 NOV -9 AM 9:49  
CLERK OF DISTRICT COURT  
DISTRICT OF COLUMBIA

The number of shares of stock is: 100 shares of common stock.

Name and Title: Sonia Galindo, Director

Address: 1201 South Joyce Street, Suite C006 Address: 1201 South Joyce Street, Suite C006

Arlington, VA 22202

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: C T Corporation System  
Address: 1200 South Pine Island Road  
Plantation, FL 33324.

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Todd M. Aman  
Address: 1201 South Joyce Street, Suite C006  
Arlington, VA 22202

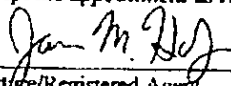
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL.)


(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

By: C T Corporation System  James M. Halpin Asst. Secretary 11/09/20  
Required Signature/Registered Agent Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*

  
Required Signature/Incorporator 11/9/20  
Date